Professional Opinion Adverse to Vaccination: British.

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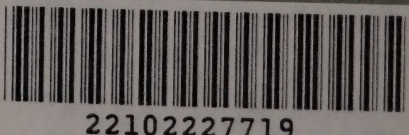
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PROFESSIONAL OPINION ADVERSE TO VACCINATION:

BRITISH.

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COMPILER'S PREFACE.

The object of this booklet is to reproduce in a convenient form evidence that the prevailing idea of unanimity of the medical profession on the subject of vaccination is inaccurate.

It is unnecessary to remind many of those who will peruse the following pages, that throughout the whole of the 19th century there have been dissentients among the most observant medical men; yet, only those who have closely noticed comparatively recent events and publications will have realized that, probably, never before has there been a time when so many distinguished recondite medical students, who have had the advantage of experience and history of vaccination to guide them, have voiced themselves so strongly against the practice, or so emphatically declared its ultimate abandonment inevitable.

Every civilized nation, every parent, every adult is interested in the question of compulsory vaccination and re-vaccination; every voter shares the responsibility of the legislation unfortunately associated with this matter, and before countenancing either a continuance of existing regulations and endowments or the institution of more rigorous statutory fetters for their neighbours, it is the duty of all concerned to inform themselves of the real attitude to-day of the more especially studious portion of that essentially benevolent profession to which they not unnaturally look for light and leading.

If the few fragments of evidence here presented lead inquirers either toward more extended investigation, or toward greater consideration for those who oppose and refuse vaccination, the compiler's object will then have been attained.

ABBREVIATIONS.

V. I.—*The Vaccination Inquirer*, published by the National Anti-Vaccination League, of 50, Parliament Street, Westminster, London, S.W.

H. & P. V.—History and Pathology of Vaccination, by Professor Crookshank; published by H. K. Lewis, Gower Street, London.

R.C.V.—Royal Commission on Vaccination, 1889–1896.

B.M.J.—*British Medical Journal*, 427, Strand, London.

Dr. Collins' Essay:—"Have you been vaccinated, and what protection is it against the small-pox?" Fourth Edition—1868. (H. K. Lewis, Gower Street, London.)

PROFESSIONAL OPINION ADVERSE TO VACCINATION: BRITISH.

Dr. John Birch, M.R.C.S., etc., (Surgeon extraordinary to H.R.H. The Prince of Wales) :—

"The experiment of vaccination has been carried on from the commencement to the present period with a degree of art which does not augur much in favour of the cause. The number of persons adduced as supporting it when before the Committee of the House of Commons was forty: but the public has not been told that out of this forty, twenty-three spoke from hearsay only, not from any knowledge they had acquired by practice; while the three persons who spoke against it, corroborated their evidence by proofs. Strong as this fact is, no one has taken notice of it. When first vaccination was recommended to me it was announced authoritatively to be an absolute security against small-pox: but the experiment, when tried at St. Thomas's Hospital, failed." (*Letter to Rogers, July 6th, 1805.*) (*See H. & P. V., Vol. II., p. 305.*)

"I shall continue firm in the opinion I gave to the Committee of the House of Commons, that what has been called the cow-pox is not a preservative against the natural small-pox."—(*Gent. Mag., 1805, H. & P. V., Vol. I., p. 192*).

"The failures which occurred instead of operating conviction, seemed but to change the theory of the system: new doctrines, new books, new instructions, appeared every month. Even the first principle of the origin of the disease could not be settled."—A.D. 1805.—(*See V. I., January, 1903, p. 190.*)

Dr. Beddoes, of Bristol :—

"You know Dr. Jenner's experiments with the cow-pox. His idea of the origin of the virus appears

to be quite indemonstrable, and the facts which I have collected are not favourable to his opinion that the cow-pox gives complete immunity from the natural infection of small-pox. Moreover the cow-pox matter produces foul ulcers, and in that respect is a worse disease that the mildly inoculated small-pox."—(*Hufeland's Medical Journal, A.D. 1799.*)

Dr. Moseley:—

"I thought then, as I do now, that experience is not necessary to know that cow-pox cannot be a preventive of small-pox."—(*Dr. Collins' Essay, "Have you been vaccinated?" p. 38, Lewis.*)

"I attempted at the time when this practice first spread itself, to arrest the hurry which I perceived was bearing away the public opinion like a torrent: but I then found inculating caution had no effect, and and there was no reasoning with minds in a state of inflammation. . . . . How far the cow-pox may be preferable to the small-pox must depend on time and experience. If the cow-pox, as it is said, be a preventive against the small-pox, so that people who have had the cow-pox can never have the small-pox; if, as it is said, also, it does not leave any foul humours in the blood or vitiate the constitution of people inoculated therewith: if, as it is moreover said, it be a disease mild in its progress and safe in its termination: for introducing the cow-pox and suppressing the ravages of the small-pox, Dr. Jenner has conferred a most essential benefit on mankind: but on these points I am not yet satisfied."—(*In loc. p. 41.*)

"Come and see—I have lately had some of the worst species of malignant small-pox in the Marylebone Infirmary, which many of the faculty have examined and know to have been vaccinated."—(For two days he had an exhibition in his Lecture Room

of a number of children suffering from terrible eruptions and other diseases after vaccination.)—(*"Vaccination a delusion," p. 10, Swan, Sonnenschein & Co.*)

Mr. John Stevenson, of Kegworth, in an account of experiences arising in his own practice, communicated to the *Medical and Physical Journal*, August, 1801:—

"Two children were vaccinated in June, 1800. Six months afterwards both these children were inoculated with recent variolous matter, to remove all doubts in the minds of the parents about the efficacy of cow-pox." Of these Mr. Stevenson wrote: "You may conceive my confusion and chagrin when, on the eighth day, I received a message requesting me to visit my young patients, who complained of headache, chilliness, sickness, and the other precursory symptoms of small-pox. On my arrival I found, to my sincere regret, that there was little doubt of their having the genuine variolous fever."—(*"A Century of Vaccination," p. 112.*)

Dr. Squirrel, Small-pox Hospital, St. Pancras:—

"I am apprehensive that the public will soon have reason to regret that such a disease as cow-pox was ever known, and to acknowledge that so far from the discovery being a blessing it will be a curse, not only to the present, but to future generations."—(*Observations . . . .on Cow-pox, showing that it originates in scrofula, p 8.*)

"The daily occurrence of small-pox subsequent to vaccination, has so much alarmed and intimidated the public, that they have refused both of the inoculations; for as they very justly remarked, if the one be attended with such dreadful consequences as the vaccinators have pointed out, and the other experience tells us affords no security against the small-pox, we will

make use of neither, but trust to the will of Divine Providence."—(*In loc. prefix to 2nd Ed., January 29th, 1806, see Dr. Collins' Essay, "Have you been vaccinated?" pp 43, 44, Lewis.*)

Dr. Rowley (Author of "Cow-pox Inoculation, no security against small-pox."):—

"As to temporary security by cow-pox inoculation, against small-pox infection, there exist so many opposing facts to this chimerical idea, from children having had small-pox from two months to six years after passing through regular vaccination, with the scars on both arms, that this, like the other vaccination extravagancies, is perfectly refuted by facts!! Even temporary expectation from cow-pox in preventing small-pox is vain, idle, irrational and inconclusive, except in the credulous minds of vaccinating, disappointed zealots, shifting their ground from one absurdity to another.". . . "There is scarcely a week passes that I do not prescribe for some miserable case or other. The parents and friends in general are so exasperated against cow-pox, that they seldom apply to the vaccinators, who they naturally consider the cause of their children's misery. This may account for the vaccinators saying few such cases come under their knowledge or inspection, though frequently seen and prescribed for by others."—(*See Dr. Collins "Have you been vaccinated?" p 47, H. K. Lewis.*)

Dr. Goldson:—

"In 1804, Mr. Goldson, Surgeon, of Portsea, published a pamphlet containing minute facts and observations concerning cases of small-pox 13 months, 14 months, 3 years, 3 years and 3 months, &c., &c., after vaccination, which he addressed to the Directors of the Vaccine Institution in a friendly spirit. He says (p 63):—'I only ask for further investigation; vaccine inoculation must stand by its own merits, or

fall from its own immediate defects.'. . . 'To suffer zeal for the discovery to shut their eyes to conviction, and by deeming every failure spurious to conceal it, is beneath the dignity of the profession.'. . . . He was met by the declaration to which modern ears have become familiar—'Well, if vaccination does not prevent small-pox, it at least modifies the attack.' Such was the candour of his mind, that he says that, if it were so, he should be ready to 'extend its benefits, and gladly cherish the pleasing idea of banishing small-pox from the world;' but having had proofs of the thorough breakdown of the practice, he felt constrained to express the opinion that it (vaccination) will at no distant period cease to be hailed as a blessing."—(*Dr. Collins "Have you been vaccinated?" p 42.*)

Dr. Alexander Monro:—

"Ever since the publication of Dr. Jenner's discovery respecting the cow-pox, there have been various rumours afloat of small-pox occurring after the cow-pox. In consequence of the experience which I myself have had as to the anti-variolous effects of cow-pox, I confess I was led to suspect that some mistake had been committed, either as to the nature of the disease, or as to the previous vaccination. At length, about nine years ago, all doubt from my mind was removed, in consequence of my having had ocular and very distinct evidence of perfect vaccination having failed to produce the promised security."—(*Monro's observations—see Crookshanks, H. & P. V., Vol. 1., p 435.*)

Dr. Smith, of Dunse:—

"I have seen a multitude of cases in which small-pox has, in every possible shape, taken place after vaccination, I feel myself placed in the painful situation of bringing forward many facts to which

gentlemen of the first eminence in the profession will probably give little or no credit."—(*H. & P. V., Vol. 1, p 444.*)

Mr. Badcock:—

"Towards the end of the year 1836, I suffered severely from a dangerous attack of small-pox, which happened but a few months after re-vaccination."—(*H. & P. V., Vol. 1, p 449.*)

Mr. Ackerley:—

"I have no doubt that syphilis has been communicated from a diseased to a healthy child by means of vaccination."—(*Dr. Collins' Essay, p 36.*)

Dr Thomas Brown:—

"I have no hesitation in confessing that I became an early convert and advocate for the new practice, and it is now eight years and a half since I have uniformly advised and practised vaccination; in which period I may safely say, I have vaccinated upwards of 1200, and have had only three cases of inoculation, which were at the positive request of their parents . . .

"I am now perfectly satisfied, from my mind being under the influence of prejudice, and blind to the impression of the fairest evidence, that the last time the small-pox was prevalent, I rejected and explained away many cases, which were entitled to the most serious attention, and showed myself as violent and unreasonable a partisan as any of my brethren in propagating a practice which I have now but little doubt we must ere long surrender at discretion."—(*An enquiry into the anti-variolous power of vaccination, see Dr. Collins' Essay, p 53, H. K. Lewis.*)

Dr. Charles Maclean, M.D., Lecturer on Diseases:—

"I found those were right who had represented the cow-pox experiment as a splendid delusion . . . It was never their (the vaccinators) custom to meet an adversary with reasoning, to examine fairly into facts.

It was not truth they wanted, but vaccination . . . . Excepting in the metropolis, where it was made a job, a majority of medical men have held opinions adverse to vaccination, although the clamours of the zealots, or a dislike to controversy, or motives of prudence or discretion, would appear to have induced them to remain silent. All men are not inclined to take mad bulls by the horns."—(*Dr. Collins' Essay, p 55, Lewis.*)

"*Doctrine :*—Vaccination or cow-pox inoculation is a perfect preventive of small-pox during life. (Jenner, &c.) *Refutation :*—535 cases of small-pox after cow-pox. *Doctrine :*—Cow-pox renders small-pox milder. It is never fatal. *Refutation :*—97 deaths from small-pox after cow-pox and from cow-pox diseases."—(*Medical Observer, A.D., 1810, see "Vaccination a delusion," p 11.*)

Dr. Gregory, M.D., F.R.S., (Physician to the Small-pox and Vaccination Hospital for 50 years) :—

"Small-pox does invade the vaccinated, and the extirpation of that direful disorder is an event as distant now as when it was first heedlessly (and in my humble judgment, most presumptuously) anticipated by Jenner."—(*Medical Times and Gazette, new series, Vol. IV., p 633, June 26th, 1852.*)

Sir J. Y. Simpson, Bart., M.D., D.C.L. :—

"I believe the same principle of stamping out could be as successfully applied to the extirpation of small-pox among us as it has been applied to the extirpation of rinderpest, but of course with great differences . . . . Isolation is the chief and leading measure required to stamp out small-pox . . . . the following measures would perhaps form the chief points to be attended to in the way of regulations :—(1) The earliest possible notification of the disease after it has once broken out upon any individual or individuals. (2) The seclusion, at home or in hospital,

of those affected, during the whole progress of the disease, as well as during the convalescence from it, or until all powers of infecting others is past. (3) The surrounding of the sick with nurses and attendants who are themselves non-conductors or incapable of being affected, inasmuch as they are known to be protected against the disease, by having already passed through cow-pox or small-pox. (4) The due purification during and after the disease, by water, chlorine, carbolic acid, sulphurous acid, &c., of the rooms, beds, clothes, &c., used by the sick and their attendants, and the disinfection of their own persons . . . . . The measures which I have suggested would probably, in my opinion, stamp out small-pox in Great Britain within six months or a year."—(*R. C. V., Fourth Report, pp. 40 and 42.*)

Dr. James Copland :—

"What was then predicted has since been so generally fulfilled, that re-vaccination has been adopted in many places, and has often failed, natural small-pox having notwithstanding appeared in the re-vaccinated, both in those in whom the measure appeared to have succeeded, and in those in whom it failed."—(*London Medical Repository, 1823.*)

"At the time of my writing this, just half-a-century has elapsed since the discovery and introduction of vaccination, and after a quarter-of-a-century of most transcendental laudation of the measure, with merely occasional whisperings of doubt, and after another quarter-of-a-century of reverberated encomiums from well-paid Vaccination Boards, raised with a view of overbearing the increasing murmurings of disbelief among those who observe and think for themselves, the middle of the 19th century finds the majority of the profession, in all latitudes and

hemispheres, doubtful as to the preponderance of advantages, present and prospective, to be obtained either from inoculation or from vaccination."—(*Dictionary.—See also Dr. Collins' Essay, p. 59.*)

Dr. W. J. Collins, M.D., L.R.C.P., M.R.C.S., L.M.:—

"The Legislature, on August 12th, 1867, passed an Act 'To consolidate and amend the laws relating to vaccination.' One of the arguments advanced by Lord Robert Montagu . . . . and which, doubtless, had some influence upon the unthinking part of that august assembly, was 'That the reason why so many persons suffered from small-pox after vaccination, was, that they had hitherto been vaccinated with dry lymph, that this dry lymph became deteriorated, often conveyed other diseases, and was no protection against small-pox.' The object of the present Bill was to insist upon children being vaccinated from arm to arm, a practice adopted in Scotland which had almost exterminated the small-pox (?)" . . . . . .

"According to Lord Robert Montagu, those persons who have thus been operated upon with dry lymph, are just as likely to take the small-pox as if they had never been vaccinated, and it is just possible, nay, more than probable, that they have been inoculated with other filthy and loathsome diseases." . . . . . .

"At one period, by a blind and inveterate opposition to the laws of nature, at least half-a-million of lives were cut off annually by small-pox in Europe alone. It is a melancholy fact, but unfortunately too true, that for many hundred years the efforts of physicians were exerted rather to thwart nature, and to add to the malignity of this complaint, than to aid her in her efforts to eliminate it from the system. 'Bleeding till the blood was thin, purging till the body was wasted to a skeleton, and starving on vegetable diet to keep it so,' was the practice at

one time generally adopted; those only who were left to nature recovered."

"Pigeons' dung and the blood of weasels, an infusion of sheep and goats' dung, were also favourite remedies." . . . .

"The practice of fumigating those who were suffering from small-pox had many advocates; in winter it was generally adopted by burning tamarisk wood and vine-stalks; doubtless many were suffocated." . . . .

"In the beginning of the eighteenth century, the practice of inoculating with small-pox with a view of mitigating the disease, was the next remedy suggested. It was believed at one time that everyone must have the disease, and that it was better to have it in a modified form, by being inoculated, than to run the risk of taking it naturally. This practice was not devised, like the other remedies I have already touched upon, by physicians, but was communicated to the faculty through the Royal Society of London. . . . . It met with great opposition, and was not generally adopted until 1754, when the College of Physicians expressed themselves strongly in its favour . . 'The College considered it highly beneficial to mankind.' This operation was not, as the public were led to believe, unattended with danger—many died after it—and it was instrumental in keeping the disease rife amongst us. Other people were just as likely to take the disease in its worst form by being brought in contact with those who had been inoculated, as if they had been exposed to those who were suffering with small-pox in the natural way. In 1763, small-pox assumed an epidemic character . . . . through the principal cities of France, and occasioned such dreadful devastation that the vigilance of the police was immediately aroused, and the legislature investigated the cause of the augmented mortality.

From evidence collected, it was proved to be owing to the increased infection from inoculation, and a decree was issued prohibiting the practice.". . . . . .

"The improved way in which the operation was performed by the Suttons, Baron Dimsdale and others, together with the high encomiums in favour of it by Dr. Mead, who declared, in spite of all the facts that were brought before him to the contrary, that no one could have the small-pox a second time, and he being a great authority, and a very fashionable leading man in his day, inoculation became general throughout Great Britain and most parts of the Continent. In Germany, Russia and other Continental States, the practice of inoculation was favourably received and generally adopted; but in Spain it was soon relinquished. They benefited on this occasion by their sluggishness, for no other country in Europe has suffered so little from small-pox."

"Inoculation with small-pox is now a penal offence, thanks to the late Thomas Wakley, whose untiring zeal and energy to make it so, in the House of Commons, is deserving of all praise."

"Consumption, scrofula, and other blood diseases were comparatively unknown before small-pox and cow-pox inoculation were introduced.

"On May 14th, 1796, Jenner inoculated with cow-pox, James Phipps, a strong healthy lad, eight years old, and he is said to have gone through the disease in a satisfactory manner. In the following July, variolous matter taken from a pustule was carefully inserted by several incisions into this boy, but no disease followed; he afterwards died of consumption.

"Dr. Jenner's eldest son Edward, when a year-and-a-half old, was inoculated with swine-pox matter. He too passed through the disease with little or no constitutional disturbance. Variolous matter was

inserted into his arm at different periods without exciting the least effect apparently upon his constitution. Other members of his family were afterwards operated upon in the same way, and they all died of consumption." . . . . .

"I have been 25 years in active practice, and I have had perhaps as many opportunities as most men of making myself thoroughly acquainted with diseases generally, and I am of opinion that there is no certainty of the way in which this so-called prophylactic will act upon various constitutions." . . .

"The mother of this child brought two other children to be vaccinated from her child, which operation I performed at her request. I saw nothing of these two cases for three weeks after, when to my horror and disgust I found them suffering with a disease that shall be nameless." . . . . .

"Two of the worst cases of confluent small-pox which proved fatal in both patients, came under my notice lately. They had both been vaccinated and re-vaccinated. Dr. C. J. B. Williams saw one of these cases with me, and can bear testimony to the fact. The servants and friends who were constantly in attendance upon this patient, had not been vaccinated, and instead of this practice being put in force, as is the custom nowadays, they were, at my suggestion, all left unprotected, and, contrary to everybody's expectation, not one of them caught the small-pox."

"By cow-pox inoculation we excite an abnormal state of the blood by this poison infiltrating itself into the sub-cutaneous and deep cellular tissue, which, becoming absorbed into the system, either imparts the tuberculous germs or cells, or occasions their progressive development in constitutions where no evidence of their existence had been previously detected. How many painful disorders, glandular swellings, scrofulous looking ulcers, and other

complaints latent in the system, become developed by vaccination! Life is at all times precious! There are but a few feet of earth between us and the grave! Why then should our passage be facilitated into the *mole* country by poisoning our blood immediately we come into the world? . . . .

I am of opinion that small-pox has never been diminished by vaccination; on the contrary, in those of a small-pox habit of body, it is often the means of calling that disease into operation."

Cow-pox inoculation, whether performed from the original source, the greasy heels of the consumptive horse, or that still more questionable practice of first giving the cow the small-pox, and then impregnating healthy children with this filthy disease, is a practice dangerous to the community at large."—("*Have you been vaccinated?*" *H. K. Lewis.*)

Sir Thomas Watson, M.D.:—

"Connected with the small-pox and arising from the same contagion, there are several forms of eruptive disease. I mentioned the chief of them in the last lecture, as varieties of *modified* small-pox. Now these mild and irregular forms of variola, both parents and medical men, wishing, I suppose, to believe nothing in disparagement of the protecting power of vaccination are apt to consider and to call chicken-pox."—("*Lectures on the Principles and Practice of Physic,*" *Vol. II., p. 85; see* "*Vaccination Inquirer,*" *August, 1903, p. 96.*)

"I can readily sympathize with and even applaud a father who with the presumed dread, a misgiving in his mind, is willing to submit to multiplied judicial penalties rather than expose his child to the risk of an infection so ghastly."—("*Nineteenth Century,*" *June, 1878, p. 1006.*)

Dr. Dennis Turnbull, L.R.C.P. :—

"Every careful medical and surgical observer must have noticed that a great increase of tumours and cancers has been manifest from the beginning of this century, and especially during the last 30 years ; and there is no evidence, nor is there any record in medical journals or statistical literature, of a like increase in the last century.

In my treatment of tumours and cancers during the last 30 years it has fallen to my lot to come in contact with all grades of society; and with a view of eliciting the true facts, it is my habit to carefully interrogate my patients relative to their general habits of life, their antecedents and the health of their ancestors. I have, therefore, gathered a considerable store of information, which enables me to speak with some authority ; and I have no hesitation in stating that, in my judgment, the most frequent predisposing condition for cancerous development is infused into the blood by vaccination and re-vaccination."—("*Vegetarian*," *24th Nov., 1888.*) *V. I., 180, 12, 03.*

Dr W. Hitchman, M.D., M.R.C.S., etc. :—

" Why do you object to vaccination ? Hundreds upon hundreds of times has this question been put to me in the course of the last 20 years, during which I have ceased to poison the people, or taint the blood of their children with an ineradicable malady . . . . Vaccine virus, not ' pure lymph,' conveys a disease today by a compulsory statute of Queen, Lords and Commons, that is loathsome morally, socially, and physically, in the nature and extent of its health-destroying agency, as now witnessed in the loss of vigour and strength, in so large a proportion of the inhabitants of Liverpool and Lancashire generally. Vaccination is precisely one of those particular subjects which it is the solemn duty of every man and woman to examine justly for themselves . . . . . It

is an intolerable aggression upon the righteous liberty of every intelligent person in this country, or out of it, to invade the sanctity of home and parents and compel them to offer their children as a sacrifice on the altar of quacks and quackery, whose alleged preventive of small-pox, whether derived from horse-grease, cow disease, or human corruption, the most corrupt of all, not only does not prevent its recurrent outbreak throughout the world, but has, besides, the power to disfigure or destroy its victims from generation to generation. Vaccination, if worthy of respect, would need no compulsion for its acceptance, but, worse still, its own cooked statistics prove it to be an imposture, cheat, and pretence. . . . .

I affirm that now, as for 30 years past, within my own personal experience and observation, vaccination has proved itself a curse rather than a blessing, causing, primarily or secondarily, more deaths than any other disease of childhood. . . . . Small-pox, I repeat, when compared with constitutional syphilis as propagated by vaccination, is like the sweetest and loveliest blossom that was ever washed with morning dew, or embalmed in the tears of the fairest rose! State quackery attacks, by preference, the young and newly born: neither purity nor innocence is defended from its wholesale indiscriminate, corrupting influence: the strength of youth is often reduced to weakness; the healthy blood of the blooming virgin it converts to contagious poison; it blights the infant in the womb, its Protean form eludes detection by experienced eyes, and contaminates the very milk, as you have seen, drawn by the child from its mother's breast. These are the conclusions of scientific men, whose knowledge and experience of vaccination qualify them to judge rightly . . . ."—(*Speech on "Medical Freedom v. Official Despotism."* *See V. I., Vol. 3, p. 201.*)

Dr. E. Meyer, B.A., Ph.D. :—

"Five years ago, I put on record my conviction that the introduction into the human system of an animal product—particularly that of an undeveloped animal, such as a calf—involved the setting in motion of conditions that almost necessarily predisposed to cancerous growth; that in fact, by such operation, inequality, disparity, disintegration, and destruction ensue, and cancer is engendered."—(*"Cancer—a result of Vaccination." V. I., 181–12–03.*)

"It takes about 21 years to complete the growth of the human being, while the growth of a bull or cow is completed in about four or five years . . . The cells of which the flesh of the bull or cow or calf is built up grow so much more rapidly than those of which the flesh of a human being is composed, that to introduce any of the protoplasm, lymph, or blood taken from the body of a calf into the system of a human being is at once to provide the very conditions most favourable to the production anew of cancer, for as soon as this living protoplasm from the calf (which may be termed bovine or vaccine protoplasm) is introduced into the system of a child or adult, the cells formed by it begin immediately in consequence of their own more rapid growth or multiplication than those formed of human protoplasm, to starve and kill the latter, and although the process at first be slow, and the result be long deferred, may (aye, must) at length cause a cancer." (*Ibid.*)

Dr Thomas Skinner, Liverpool :—

Q. 20,766.—"Will you give the Commission the particulars of the case?"

Ans.—"A young lady, fifteen years of age, living at Grove Park, Liverpool, was revaccinated by me at her father's request, during an outbreak of small-pox in Liverpool, in 1865, as I had revaccinated all the girls

in the Orphan Girl's Asylum, in Myrtle Street, Liverpool (over 200 girls, I believe), and as the young lady's father was chaplain to the asylum, he selected, and I approved of the selection, of a young girl, the picture of health, and whose vaccine vesicle was matured, and as perfect in appearance as it is possible to conceive. On the eighth day I took off the lymph in a capilliary glass tube, almost filling the tube with clear transparent lymph. Next day, 7th March, 1865, I revaccinated the young lady from this same tube, and from the same tube and at the same time I revaccinated her mother and the cook. Before opening the tube I remember holding it up to the light and requesting the mother to observe how perfectly clear and homogenous, like water, the lymph was, neither pus nor blood corpuscles were visible to the naked eye. All three operations were successful, and on the eighth day all three vesicles were matured 'like a pearl upon a rose petal,' as Jenner described a perfect specimen. On that day, the eighth day after the operation, I visited my patient, and to all appearance she was in the soundest health and spirits, with her usual bright eyes and ruddy cheeks. Although I was much tempted to take the lymph from so healthy a vesicle and subject, I did not do so, as I have frequently seen erysipelas and other bad consequences follow the opening of a matured vesicle. As I did not open the vesicle that operation could not be the cause of what followed. Between the tenth and eleventh day after the revaccination—that is, about three days after the vesicle had matured and begun to scab over—I was called in haste to my patient the young lady, whom I found in one of the most severe rigors I ever witnessed, such as generally precedes or ushers in surgical, puerperal, and other forms of fever. This would be on the 18th March, 1865. Eight days from the time of this rigor my

patient was dead, and she died of the most frightful form of blood poisoning that I ever witnessed, and I have been 45 years in the active practice of my profession. After the rigor, a low form of acute peritonitis set in, with incessant vomiting and pain, which defied all means to allay. At last stercoraceous vomiting, and cold, clammy, deadly sweats of a sickly odour set it, with pulselessness, collapse and death, which closed the terrible scene on the morning of the 26th March, 1865. Within 20 minutes of death rapid decomposition set in, and within two hours so great was the bloated and discoloured condition of the whole body, more especially of the head and face, that there was not a feature of this once lovely girl recognisable. Dr. John Cameron, of 4, Rodney Street, Liverpool, Physician to the Royal Southern Hospital at Liverpool, met me daily in consultation while life lasted. I have a copy of the certificate of death here."

Q. 20,767.—"To what do you attribute the death there?"

Ans.—"I can attribute the death there to nothing but vaccination."—(*Royal Commission on Vaccination, Sixth Report, p. 128; also see "Vaccination a Delusion," p. 21, Swan Sonnenschein & Co.*).

Dr. Ayerst:—

"Madam, I would not recommend you to have that child vaccinated again; vaccination does not prevent small-pox, and it may do the child an injury."—(*See answer to Q. 9,454, R. C. V.*)

Dr. Stowell (20 years a Vaccinating Physician):—

"The general declaration of my patients enables me to proclaim that the vaccine notion is not only an illusion, but a curse to humanity."—("*Vaccination a Curse,*" *p. 130.*)

Dr. Charles Drysdale :—

"I think there can be no doubt in the minds of instructed and unprejudiced medical men that syphilis has occasionally been rather widely propagated by means of vaccination."—(*Medical Press, 8th March, 1896.*)

Professor Ricord :—

"If it be true that vaccination can transmit syphilis, then vaccination is done for. For who, pray, will run the risk of being affected with the *great*, to escape the *small* pox."—(*Edinburgh Medical Journal, March, 1862.*)

Dr. Samuel Eadon, M.A., Gloucester, *1879* :—

"Is there any wonder, with such abominable fouling of the human body, that consumption, scrofula, syphilis, cancer, and the whole vile train of skin diseases should start up and rage on" . . . . . (*See V. I., December, 1903, p. 180.*)

Dr. William Forbes Laurie, M.D. (Edin.), S. Saviour's Cancer Hosp., London :—

"I can add my testimony to that of Dr. Ange (who was 17 years engaged in the Isle of Wight, treating cancer), to the great increase of cancer all over the Kingdom. This is attributed by some medical men to the large amount of syphilitic disease, with which vaccine lymph is impregnated; by others to the direct impregnation of healthy persons with lymph imbued with scrofulous and cancerous matter. In this way they account for the large increase of cancer in all parts of the body throughout the Kingdom."—(*Letter, June 3rd, 1879, see V. I., December, 1903, p. 180.*)

Dr. J. J. Garth Wilkinson (died 1899, aged 88) :—

"In the human body, whatever enters the blood, be it even the most bland food—the juice of the grape, or the pomegranate, or the fine flour of wheat—be it

oil, wine or fig—it is broken up first, and then led inwards through long avenues of introduction. The most innocent food goes in most easily and first. The police and surveillance for the rest are exceedingly great and many. The senses electively appetise the fine food; it has to pass through their peremptory doors of liking and disliking—instructed doors of memory, association, imagination, reason, wisdom, religion in adults. It is then attacked by digestive salivas, tests, examinations and severe juices, and questioned to the uttermost in that degree, which corresponds to the former. It is strained through organ after organ; each a tribunal of more than social exactitude. It is absorbed by the finest systems of choice in pore and vessel, organic judgment sitting in every corner, and presiding over each inner doorway. It is submitted to glandular and lung purification, and their furnaces of trials and eliminations. At last it is weighed in the balances, and minted by supreme nerve wisdoms; and only after all these processes is it admitted into the golden blood. This is the best food, such as good and wise men eat. The worst food is made the best of by a constant passage through bodily mercies and mitigations, a no less sedulous though a penal process. This is physiology, and divine human decency, and like a man's life. Vaccination traverses and tramples upon all these safeguards and wisdoms: it goes direct to the blood, or still worse, to the lymph, and not with food: it puts poison introduced by puncture . . . . at a blow into the very centre, thus otherwise guarded by nature in the providence of God. This is blood assassination, and like a murderer's life."—(*Vaccination Inquirer, 39, 5, 03.*)

"The venom of vaccination gathers as it goes. Vaccination is worse to-day than it was ten years since; for it has traversed more impure bodies of man

and beast, and derives a fresh lineage and inheritance of pollution from each transmission. This is the physiological side of the case. It has also produced an intensified venom in the minds of medical pro-vaccinators, and in their rage at our educative light given to the people, made them scout truth and decency in their opposition to our homes. Their fresh assault is on the weakest, on miserably poor women confined in parish houses, whose new-born babes are violated by vaccination within a day or a week after birth."—("*Waterbury Anti-Vaccinator.*")

"The poison inserted into the blood of infants is five-fold. First poison, the matter of the vaccine disease itself. Second poison, the occasional and constitutional diseases of the cow from which the matter is derived. These are animal poisons, and tend to assimilate the blood to themselves on the animal level. Third poison, the vaccine disease of the human being. Fourth poison, the occasional and constitutional diseases of the child and family from which the matter is taken. And, fifth poison, the gathered taints of all the children through whose systems the matter has passed since it left the cow. This is what the healers of the people inject by law into the blood, or into the lymph, which is a higher blood, of every little baby in the British Islands. A five-fold coil of poison within poison; a five-fold fang in the nation's future life."—("*Human Science,*" *pp. 34 & 35.*) (*See V. I., Feb. 1902, p. 207.*)

"If he had a young family of children he would pay perpetual fines as long as his money lasted, and then go to prison rather than have them vaccinated."—(*See V. I., Dec. 1899, p. 111.*)

Dr. George Cordwent, M.D., F.R.C.S. (Deputy Coroner for West Somerset, for 20 years a Public Vaccinator):—

Q. 12,553.—"Is it the case that you have found

the result of vaccination quite unsatisfactory?" Ans.—"Certainly, I have seen a great number of cases, probably, in the course of my time, 300 cases at least of small-pox occurring after vaccination, and several cases after revaccination; I cannot tell how many, probably two or three dozen, or more than that."

"Q. 12,579.—"It would come out according to your statement, that more that half the cases of small-pox that you have seen had been previously vaccinated?" Ans.—"I believe so, much more than half."

Q. 12,591.—"Are you not aware that the question has been very fully investigated as to the exact dates at which you may suppose that any protection begins?" Ans.—"I have not seen any protection at all."

Q. 12,627.—"Have you paid any attention to the literature of vaccination?" Ans.—"I have not."

Q. 12,628.—"All your statements are from your own experience?" Ans.—"Certainly."

Q. 12,629.—"You have not paid any attention to the literature on the subject?" Ans.—"No, I am not a partisan in the least. All I state, I state from my own knowledge."

Q. 12,639.—"You have given the commission a great deal of valuable personal information, and you have seen a great deal of small-pox?" Ans.—"Yes."

Q. 12,640.—"You never avoided cases of small-pox?" Ans.—"No, I always went to them when they occurred in patients of mine."

Q. 12,641.—"Have you ever had small-pox?" Ans.—"No, I have not."

Q. 12,642.—"Have you been vaccinated?" Ans.—"Probably when I was young I was inoculated; vaccination was not prevalent then."

Q. 12,643.—"Have you ever vaccinated yourself since that time?" Ans.—"No, I have not, and I

should not like to do so."

Q. 12,644.—"You had assistants I suppose in your practice?" Ans.—"I nearly always had two when I was in active practice."

Q. 12,645.—"Did any of them ever take small-pox?" Ans.—"No."

Q. 12,646.—"Had they been vaccinated?" Ans. —"One of them had; I believe all of them had."

Q. 12,647.—"Did they revaccinate themselves?" Ans.—"I believe not."

Q. 12,648.—"Had you any reason to believe that any of them had had small-pox before they came to you?" Ans.—"They had not had small-pox."

Q. 12,662.—"You told Sir William Savory that vaccination protected for about two years?" Ans.— "I also said that I thought vaccination very often did not protect the system at all."

Q. 12,707.—"As I understand your views upon vaccination have undergone a change?" Ans.—"I had no views upon vaccination; I accepted vaccination as being orthodox in the profession. It was part of my duty as the public officer to vaccinate; but often seeing these epidemics of small-pox I had become impressed with the conviction that vaccination was not preventive."

Q. 12,787.—In your opinion, should vaccination be practiced or not?" Ans.—"I should say it should not be practised, because I see no justification in it."

Q. 12,788.—In your opinion the practice of vaccination should be discontinued?" Ans.—"Certainly."

Q. 12,789.—"When did you arrive at that opinion?" Ans.—"I arrived at that opinion perhaps twenty years ago."

Q. 12,791.—When persons have come to be vaccinated, you have advised them not to be vaccinated?" Ans.—"I have."—(*R.C.V., 4th Report, pp. 129–138.*)

Dr. (now, Sir) W. J. Collins, M.D., St. Bartholomew's Hosp., E.C. :—*

1. "I am strongly opposed to compulsory vaccination, believing vaccination should be allowed to stand or fall upon its merits, and that from its very claim to protect against the indifference of others, is the last thing that should need the assistance of the compulsory law."

2. "So far as I can judge from the examination of all available statistics, it would seem to be proved that the protection afforded against epidemic small-pox by vaccination, lies somewhere between none at all on the one hand, and very much less than a previous attack of small-pox on the other. The experiments of Jenner, and of Brown, of Musselburgh, seem to prove a temporary protection is afforded against inoculated small-pox."

3. "Erysipelas, pyœmia, eczema, prurigo, syphilis, ulceration of vesicles." (*See notes of cases*)

4. "It appears to me at variance with all our pathological knowledge of morbid poisons to suppose that more constitutional effect or more protection

* About the year 1881, Dr. Makuna, M.D., of Charing Cross, organised a Committee of Inquiry into the opinions of the Profession on Vaccination; the Committee consisted of 30 members, and a circular of inquiry was issued to 4,000 medical men, in which the following seven questions were submitted :—

1. What are your views regarding compulsory vaccination in England, Scotland and Ireland?
2. What are your views regarding the protection afforded by vaccination against small-pox?
3. What diseases have you in your experience known to be conveyed, or occasioned, or intensified by vaccination?
4. What opinion do you hold as to the quantity and quality of vaccination, as determined by cicatrices?
5. What opinion do you hold as to the relative values of humanised and animal lymph, both as regards efficacy and safety?
6. What opinion do you hold regarding the relations subsisting between variola and vaccinia, and the theory of vaccination?
7. How far do you consider insanitary conditions responsible for small-pox epidemics, and how far can small-pox be controlled by improved sanitation?

To the above questions, replies were received from about 350 medical men, amongst whom was Dr. (now, Sir) W. J. Collins, whose replies are above.

would be secured by a greater number of cicatrices. Nor can I understand how the local peculiarity of the scar can indicate the amount of the general effect."

5. "The efficacy of animal lymph at present rests on mere assertion and negative evidence: if by animal lymph spontaneous cow-pox be meant, that according to the experiments of Jenner is worthless and spurious. Animal lymph is superior to human lymph in its freedom from syphilitic suspicion, but that it can convey certain skin diseases and erysipelas and tuberculosis, appears to be distinctly proved."

6. "So far as I am enabled to judge, the evidence of Chauveaux, Klein, and Ceely, I believe in the entire non-identity of cow-pox and small-pox. This being so, I do not understand what the theory of vaccination is."

7. "I believe that small-pox as a zymotic or filth disease can and does originate *de novo* under insanitary conditions; that where once started, either *de novo* or by contagion, it is intensified and kept up by uncleanliness and overcrowding, and their concomitant evils; and that a perfect system of sanitation is the only radical method of extinguishing small-pox and its allies."—(*Transactions of the Vaccination Inquiry, Part I., p. 45, No. 291.*)

"If sanitation prevailed, the very *raison d'être* for vaccination, to say nothing of compulsion, would be everlastingly destroyed."—("*Vaccination Inquirer*," *Vol. 5, p. 88.*)

"It is now generally felt in the profession that the virtues of vaccination have been vastly exaggerated, and its evils injudiciously minimised; but on the other hand, one cannot deny that its opponents have erred in a like manner in an opposite direction. I know of no remedy for this state of things except the recourse of both parties to the scientific method, which provides a reliable prophylactic against the

heat that warps judgment and the exaggeration which helps no one. But in the cold atmosphere of science, I hold it to be proved that compulsory vaccination has been a complete fallacy in this country: that so far as logic has enabled us to prove anything, it has proved that vaccination, in the absence of sanitation, is inoperative on mortality, and that in its presence it becomes a sheer superfluity."—(*"Vaccination Inquirer," Vol. 5, p. 192.*)

Dr. M. S. Bernard Roth, M.D., F.R.C.S.:—

"My eldest child, healthy, three-and-a-half years old, was vaccinated by human lymph in Brighton, by one of the surgeons of the Sussex County Hospital. A brawny phlegmonous inflammation of the whole upper arm occurred, and if excessive care had not been taken, I am sure much sloughing would have taken place. In a poor man's house the child would probably have died."—(*Trans. "Makuna Vacc. Inq.," Part 1, p. 20, No. 29.*)

Dr. J. Goodman, M.D.:—

"If vaccination must be compulsory, it ought to be perfectly safe. But it is not, and therefore ought not to be compulsory."—(*Trans. "Makuna Vacc. Inq.," p. 21, No. 40*).

Dr. W. A. Guy, M.B., F.R.C.P., F.R.S.:—

"I should have no doubt that the State is justified in making vaccination compulsory, if it could be shown that it rarely entails injurious or fatal consequences. If it can be clearly shown to do so, by persons not committed to agitation against it, I should then speak with hesitation, proportioned to the frequency of such cases."—(*In loc, p. 21, No. 41.*)

Dr. R. H. S. Carpenter, L.R.C.P.:—

"Recently I have become opposed to compulsory vaccination. I have lost confidence in its protective power. Two months or so since, erysipelas was com-

municated to two children vaccinated by me from lymph supplied by the Local Government Board. Both children were very ill, and one nearly died."—(*In loc, p. 27, No. 104.*)

Dr. F. E. Hoggan, M.D., and Dr. G. Hoggan, M.B., C.M. :—

"Entirely opposed to compulsory vaccination anywhere. There is no scientific ground for forming an opinion as to the value or worthlessness of vaccination."—(*In loc, p. 30.*)

Dr. W. Sankey, L.R.C.P. :—

"Prove your case ; if true, no Act of Parliament will be needed. Have recently lost two children with phlegmon from it."—(*In loc, p. 34, No. 179.*)

Dr. T. Brett, M.D., of Peckham :—

"Most unjust and degrading to any civilised nation, moreover quite a farce, and tending to engender greater evils. No protection whatever. I am only surprised how any individual can give it credence."—(*In loc, p. 47, No. 318.*)

Dr. A. Johnston, M.B. :—

"(1) That it is utterly indefensible. (2) That it affords absolutely none. (7) Small-pox is controllable in the exact ratio of improved sanitation."—(*Trans. "Makuna Vaccination Inquiry," Part 1, p. 49, No. 337*).

Dr. W. J. C. Ward, M.R.C.S., Harrogate :—

"I believed that vaccination prevented small-pox. I believed that vaccination if it did not absolutely prevent small-pox, modified it ; and I believed that revaccination, if only frequent enough, absolutely gave total immunity. Experience has driven all that out of my head."—(*Ans. to Q. 21,633, R.C.V.*)

"I have seen that people who have been vaccinated get small-pox, and people who have been revac-

cinated get small-pox, and I have seen people who have had small-pox once get a second attack of it, and die of it."—(*Ans. to Q. 21,635, R.V.C.*)

"The only point I am doubtful upon is whether it has any modifying effect upon those who take small-pox. I have a lingering suspicion of doubt upon it, not from experience, but from statistics, which I have seen or had placed before me. That it has no effect in preventing small-pox, that I am convinced of from personal experience."—(*Ans. to Q. 21,638–40, R.C.V.*).

"There was an outbreak of small-pox at Armley Gaol. There were two cases, one of which fell into my hands as Medical Officer of Health. I think it was the tailor who was working there, and the authorities gave me *carte blanche* to do what I possibly could with the case. The man lived in a house with his father, mother and brother; they kept him in an upper room, his father and mother attended to him. We isolated the whole lot; we paid them their wages and took them their food and everything, so that there was no contact with the outside world. The man recovered, and we had no more trouble with them. Everything in the room, and every particle of his clothing was destroyed and disinfectants used, and we had no more cases,"—(*Ans to Q. 21,791, R.C.V, sec, V.I., Oct. 1897, p. 92.*)

Sir B. W. Richardson, M.D., F.R.C.P., F.R.S.:—

"Inoculation is bad sanitation."—("*The Asclepied*" *No. 23, 1889.*)

"If it be true that we of physic have really, for well-nigh a century past, been worshipping an idol of the market place, or even of the theatre, why, the sooner we cease our worship and take down our idol, the better for us altogether. We have set up the idol, and the world has lent itself to the idolatry,

because we whom the world has trusted have set the example. But the world nowadays discovers idolatries on its own account; and if we continue the idolatry it will simply take its own course, and, leaving us on our knees, will march on while we petrify."—("*The Asclepied*," *Vol. VII, p. 91.*)

"Science is, in the main, mostly useful, but is sometimes proud, wild and erratic, and has lately proposed a desperate device for the prevention of infectious perils. She proposes to prevent one peril by setting up another. She would inoculate new diseases into our old stock, in anticipation that the new will put out the old. I pray you, be not led away by this conceit. This manufacture of spic-and-span new diseases in our human, bovine, equine, ovine, canine, and perhaps feline species is too much to endure the thought of, especially when we know that purity of life is all sufficient to remove what exists, without invoking what is not."—(*Sanitary Institute Congress at Brighton, 1881, see "Journal Sanitary Inst.," Vol. XXIII, pp. 340–341, Oct., 1902*)

Professor E. M. Crookshank, M.B., M.R.C.S. (Prof. of Pathology and Bacteriology, King's College, London.

"I had devoted myself for some time to pathological researches in connection with the communicable diseases of man and the lower animals, when the discovery of an outbreak of cow-pox, in 1887, led me to investigate the history and pathology of this affection. At that time I accepted and taught the doctrines, in reference to this disease, which are commonly held by the profession and are described in the text books of medicine.

In endeavouring to discover the origin of this outbreak, it was proved beyond question that the cows had not been infected by milkers suffering from

small-pox. This fact, together with the clinical characters of the disease in cows, and in the milkers infected from the cows, and the certainty that I had to deal not with an infectious disease like cattle plague or pluero-pneumonia, but with a disease which is communicated solely by contact, convinced me that the commonly accepted descriptions of the nature and origin of cow-pox were purely theoretical."—(*Vol. I, p. 6, "History and Pathology of Vaccination," H. L. Lewis.*)

"Jenner . . . concluded that, in Woodville's cases, the eruptions resulted from the action of variolous matter which crept into the constitution with the vaccine. Both Woodville and Pearson acknowledged afterwards that the eruptions arose from variolation. This accident was far from proving well nigh fatal to the interests of vaccination; it was, on the contrary, the most fortunate occurrence for Jenner and his cause. I regard it as having been productive of results which completely turned the scale of opinion in favour of the new inoculation. The variolous test, in Jenner's cases, had been far from convincing. But here were 60 cases in which the variolous test appeared to settle the question conclusively, for neither inoculation nor exposure to infection produced any result. The cow-pox got the credit in these 60 and many similar cases . . . . . but the fact that these patients had been variolated (and perhaps cow-poxed at the same time) and were therefore naturally protected from a subsequent attack of small-pox, was overlooked and forgotten . . . . . I must repeat, the immunity was produced by small-pox, which was introduced into the constitution as the result of vaccinating in a variolous atmosphere, or of employing contaminated lancets It is not surprising that cow-pox inoculation continued to gain ground, and that distinguished persons

in different parts of the kingdom, adopted the new practice."—(*Vol. I, p. 163.*)

"Jenner, however, was fully aware that small-pox had occurred after perfect vaccination, and in his correspondence with Mr. Dunning, he was prepared with various answers to meet these cases, though, at the same time, he endeavoured to suppress their publication."—(*Vol. I, p. 179.*)

"The new inoculation was shortly afterwards tested on a large scale (in U.S.A.). A Dr. S. obtained lymph from a sailor, who had arrived at Marblehead, from London, and was supposed to be suffering from cow-pox, but in reality had small-pox. Dr. S. began to use it, and produced an epidemic of small-pox. Previous to this accident, Dr. D. had inoculated about 40 persons from the arm of Dr. Waterhouse's son, and all who had been vaccinated took the small-pox, either casually or by inoculation, one excepted." —(*Vol. 42.*)

"But the great question, after all, was whether this disease did or did not protect from small-pox; and there were two ways in which this was put to the test. Were persons after vaccination insusceptible of inoculation with small-pox, and were they proof against exposure to infection? A sufficient answer to the first question is the fact that Jenner discountenanced the variolous test as unfair, and it is therefore unnecessary to detail the cases in which inoculation of small-pox succeeded after vaccination. With regard to the test of exposure to infection, evidence—especially towards the last few years of Jenner's life—was equally overwhelming; but the failures were attributed to the use of improper lymph, or too badly or inefficiently performed vaccination, or the small-pox was regarded as malignant chicken-pox." —(*Vol. I, pp. 434–435.*)

"His (Baron's) historical investigation, as I have

already pointed out, resulted in proving to his own satisfaction that Jenner's cow-pox was the remnant of an attack of cow small-pox, and thus he justified the term *variolæ vaccinæ*, and endeavoured to establish the protective power of cow-pox. But his elaborate statement proved to be a tissue of blunders, for the disease described as cow small-pox had nothing to do with the cow-pox; it was, in fact, cattle plague. At the time, however, Baron's teachings were accepted, and his blunders fulfilled his purpose."—(*Vol. I, p. 447.)*

"I must again assert that there is no proof whatever that the disease, cow-pox, was produced by the inoculation of cows with human small-pox . . . . . The practical student of cow-pox is at once convinced without any further evidence that the two diseases. small-pox and cow-pox, are specifically distinct. Cow-pox is a disease communicable solely by contact. Small-pox is a disease, which, though inoculable, is also highly infectious. Cow-pox begins as a local affection, and is followed by constitutional symptoms. Small-pox is an acute disease, characterised by sudden and severe fever, which is followed after 48 hours by a generalised eruption."—(*Vol. I, p. 459.*)

"As a result of an investigation into the history, and especially the pathology of 'vaccination,' I feel convinced that the profession has been misled by Jenner, Baron, the reports of the National Vaccine Establishment, and by a want of knowledge concerning the nature of cow-pow, horse-pox, and other sources of 'vaccine lymph.' Though, in this country, vaccine lymph is generally taken to mean virus of cow-pox, yet the pathology of this disease, and its nature and affinities, have not been made the subject of practical study for nearly half a century. We have submitted instead to purely theoretical teaching, and have been led to regard vaccination as inoculation of

the human subject with the virus of a benign disease of a cow, whereas the viruses in use have been derived from several distinct and severe diseases in different animals."—("*History and Pathology of Vaccination*," *A Critical Inquiry, Vol. I, p. 463.*)

"While attending at the National Vaccine Establishment of the Local Government Board, I was unable to obtain any exact details, clinical or pathological, of the source of the lymph which was employed there. From my experience of this and other vaccination stations, I found that both official and unofficial vaccinators were completely occupied with the technique of vaccination, to the exclusion of any precise knowledge of the history and pathology of the diseases from which their lymph stocks had been obtained."—("*History and Pathology of Vaccination*," *Vol. I, p. 6.*)

"Inoculation of cow-pox does not have the least effect in affording immunity from the analagous disease in man, syphilis, and neither do cow-pox, horse-pox or sheep-pox, cattle plague or any other radically dissimilar disease exercise any specific protective power against human small-pox. Inoculation of cow-pox, horse-pox, and cattle plague have totally failed to exterminate small-pox, and for the eradication of this disease we must in future resort to methods similar to those proposed by Haygarth, which, in modern times, have been so successful in stamping out diseases of the lower animals, such as cattle plague, foot and mouth disease and sheep-pox. In the case of the lower animals this has been effectually performed by notification, combined with either slaughter, isolation or muzzling . . . . . Small-pox might be stamped out in the same time (twelve months) by notification and a rigid system of isolation."—(*Vol. I, p. 464–465.*)

"There can be no doubt that ere long a system

of compulsory notification and isolation will replace vaccination. Indeed, I maintain that where isolation and vaccination have been carried out in the face of an epidemic, it is isolation which has been instrumental in staying the outbreak, though vaccination has received the credit.

Unfortunately, a belief in the efficacy of vaccination has been so enforced in the education of the medical practitioner, that it is hardly probable that the futility of the practice will be generally acknowledged in our generation, though nothing would more redound to the credit of the profession and give evidence of the advance made in pathology and sanitary science. It is more probable that when, by means of notification and isolation, small-pox is kept under control, vaccination will disappear from practice, or will retain only an historical interest."—("*History and Pathology of Vaccination*," *Vol. I, pp. 465–466, London, 1889, H. K. Lewis.*)

"To the Editors of the *Lancet*:—

Sirs,—On my return from Egypt I read the review of my work on the above subject in your issue of March 1st, and, as the question of vaccination is attracting so much attention, owing to the appointment of a Royal Commission, I trust you will allow me to make some observations in reply.

I find the following statement in reference to the lessened mortality from small-pox: 'It is surely idle to urge such reasoning (sanitation, isolation, E.M.C.) in face of the fact that vaccination has been practised for three times the period that the principles of sanitation have been put in force." Surely your reviewer can scarcely have read the chapter on Haygarth's system of preventing small-pox. Nearly 20 years before the introduction of vaccination, Haygarth taught that men were not necessarily subject to the small-pox, and that it could be avoided by observing

certain rules. And not only had Haygarth's teaching a great effect on the profession and the public, but his scheme was actually carried out in Chester with great success, thus anticipating by more than a century the Leicester system, and its later development in Mr. Richie's Act.

I maintain that there *were* 'other circumstances' at work in producing the lessened mortality from small-pox. That small-pox was actually spread by inoculation was openly acknowledged by the leading surgeons and physicians of the day, such as Dimsdale and Adams . . . . . Cow-pox inoculation, by superseding small-pox inoculation, was undoubtedly of great service in getting rid of this fertile source of small-pox. And it was some 'other circumstances,' and not cow-pox inoculation, which enabled Dr. Adams, F.R.S., physician to the London Small-pox Hospital, to write in 1807, 'there are men in the highest practice in London who have rarely had occasion to visit a small-pox patient.' . . . .

Again, let me remind your reviewer, that while Dr. Creighton was the first in this country to bring into prominent notice the affinity between cow-pox and syphilis, we must not forget the labours of Auzias-Turenne, in France, who for more than 20 years investigated syphilis, cow-pox, and horse-pox—his classical papers being published from about 1844 to 1867.

In conclusion, I still maintain there is no scientific support for what is generally understood by 'vaccination,' and that the practice is destined in more enlightened times to fall into desuetude, being replaced by the more rational and comprehensible procedure of the compulsory notification of small-pox and the isolation of all cases of this disease, or, in other words, the stamping-out system."—("*The Lancet*," *May 24th, 1890, p. 1,148.*)

Dr. Charles Creighton, M.D., B.A. (Professor of Epidemiology, Demonstrator of Anatomy at Cambridge University, and Surgeon to St. George's and Charing Cross Hosps., London):

Q 5,430 (Mr. Dugdale).—"Will you kindly tell me whether in your opinion vaccination affords any protection against small-pox?" Ans.—"I have been desirous of avoiding the broad question, but, as you have asked it, I suppose I am bound to answer it. In my opinion it affords none."

Q. 5,431 (Sir James Paget).—"In your opinion vaccination affords no protection at all?" Ans.—"In my opinion, none at all."

Q. 5,432 (Mr. Dugdale).—Then, if that be so, if vaccination affords no protection, one would expect to find that persons who were in infected houses were attacked in the same ratio in a small-pox epidemic, whether they were vaccinated or unvaccinated?" Ans.—"There are always constitutional peculiarities to be taken into account. Many are susceptible, and many are not; and no one can say where the susceptibility arises, and where it is wanting."

Q. 5,433.—"But constitutional susceptibilities would not have any very serious effect on the percentage attacked, I suppose?" Ans.—"The same variations appeared in the last century, when there was no question of vaccination at all."

Q. 5,449 (Mr. Meadows White).—"I understand you have come to the conclusion that there is no protection whatever in vaccination after having given considerable study to the statistics which have been collected and furnished to the various commissions?" Ans.—"I have come to that conclusion: first of all, because of the large amount of negative evidence; and secondly, because of the impossibility of finding any half-way explanation of the process. It either protects, or it does not protect. The evidence of

modification appears to me to have no scientific basis."

Q. 5,468 (Mr. Picton).—"You have given us a decided opinion that vaccination does not protect from small-pox; you were not always of that opinion, were you?" Ans.—"Until I began to look into the subject for the purpose of the article which I wrote in the *Encyclopedia Britannica*, I held the ordinary belief which I had been taught as a student without any question, and it took a good long time to change it."

Q. 5,469.—"May I ask what were the facts which led you to doubt the efficacy of vaccination?" Ans. —"What made me suspicious at the outset was the nature of cow-pox. When I began to ask myself what is cow-pox, I was very much astonished at the state of the case, and it appeared to me that such a disease as cow-pox was, on the evidence of who described it in Jenner's time, and who have described it subsequently, could have antecedently no relation at all to small-pox. That was the suspicion from which I started, and from that suspicion I went on in the downward path of scepticism until I landed in total unbelief."

Q. 5,471.—"Referring to the case of Sheffield, which would you regard as the more important fact: the general broad fact that a town vaccinated to the extent of 95 per cent. was swept by a pestilence of small-pox, or the detailed little tables drawn up to show that special persons who were vaccinated were exempted from the disease?" Ans.—I have always had a preference for concrete facts, and I think that the Sheffield epidemic is a concrete fact of the most striking kind."

Q. 5,472 (The Chairman).—"A concrete fact showing what?" Ans.—"Showing the failure of vaccination to ward off small-pox."

Q. 5,473 (Mr. Picton).—"Do you think it possible to reconcile the Sheffield epidemic with the opinion that vaccination is protective to the community?" Ans.—"Certainly not."

Q. 5,474.—"In your tables which you have drawn up for us, you show a very great fall in small-pox at the commencement of the century after the year 1800. Do you think that that was owing in any degree to the beginning of vaccination?" Ans.—"In no degree. It was attributable to the same causes that favoured the decline of typhus fever, to the very striking improvement in the dwellings of the working classes, more airy streets, a better supply of water, and greater cleanliness."—(*R.C.V., 2nd Report.*)

"In giving evidence before our Royal Commission on Vaccination, on the 4th December, 1889, and at subsequent sittings, I took occasion to restate, as matter of fact, the characters of original cow-pox and their radical unlikeness to the familiar characters of small-pox; but not one of the distinguished leaders of our profession who sit on the commission, and in whose presence the evidence was tendered, took the opportunity to cross-examine me on the pathology of cow-pox and small-pox respectively, and the want of relation between them, although I was cross-examined all round about and up to the very edge of that central question."—(*The "Arena," 1890; see V.I., January, 1896, p. 139.*)

"The first Act (1840) merely declared: 'whereas it is expedient to extend the practice of vaccination.' The second Act (1853) said: 'whereas it is expedient still further to extend the practice of vaccination'—to make it obligatory. There was no statement of any reason, motive, or scientific ground for placing upon the statute book a law to enforce this extraordinary practice of inserting matter from a cow's pap into the human skin in infancy. It was never

argued out; it was taken on trust from the doctors. . . . . We have had nearly a hundred years' experience of vaccination, and it has not turned out as was expected . . . . . We want to know if it has anything to do with small-pox. He (Dr. Creighton) denied that it had the smallest concern with small-pox; the one was small-pox and the other was cow-pox. When the question comes before Parliament our best chance of getting released from this coil in which the whole thing is fixed at present, is that the members of the House should recognise that this is not a matter in which they are at all concerned, and that the State should never have interfered in the matter."—(*V.I., Nov. 1897, pp. 111–112.*)

"The fractional advantages of vaccination—and no one says they are more than fractional—exist upon paper only."—("*Daily News,*" *Nov. 12th, 1898. See V.I., Dec. 1898, p. 124.*)

Dr. Creighton's Report on Injuries at Halifax:—

"London, 25th May, 1901.

"My dear Sir,—For your guidance as an individual member of the Board of Guardians in the matter before the Board concerning the vaccinal injury to Mrs. Barnes's child, I now confirm in writing the substance of my conversation with you at Halifax yesterday, after seeing the case and ascertaining the circumstances.

The child was vaccinated at the age of eight months (being in good health) with glycerinated cow-pox at three places, on 20th March. At one of the places nothing followed, and at each of the other two the pock was late in forming—several days later than is usual; this I believe to be important in accounting for what followed. On the ninth day, 28th March, by which time the pocks should have

been fully formed and distended with matter, they had come forward very little, although the zone of redness round them, proper to that date, was present. During the next three or four days they increased in extent, and filled with matter, as they should have done several days earlier, and on the fourteenth day, 2nd April, an ichor began to escape from beneath the tumid edges of the lower of the two vesicles. This ichor, described by the mother as acting like vitriol on the surface, continued to be produced beneath the unbroken covering of the pock, which became sodden by it, and never formed a dry crust as the other pock did. On 5th April, the child's parents became alarmed at the blackness of the skin around the suppurating pock and called in the Vaccinator. The child's removal to the Halifax Infirmary was advised on the 12th, on account of the state of the arm; at at that date the corroding ulceration, or progressive sloughing (phagedaena), or rottenness, had spread so widely and so deeply in the flesh all round the pock that there was a hole in the arm as large as a crown piece in circuit, along with enormous swelling and redness of the whole arm down to the elbow. Notwithstanding the surgical treatment in hospital to arrest the sloughing, the child suffered a severe attack of general blood poisoning during the last twelve days of April, which terminated, or came to a crisis, in an outbreak of many minute abscesses, or phlegmons, under the skin at the back of the head and over the buttocks; these having been treated surgically during the period 7th to 17th May, the temperature began to be normal, and the child to make good progress towards recovery which, it may be hoped, will be complete with no other permanent injury than a somewhat deep scarred furrow across the arm, corresponding with the enormous defect of substance left by the original sloughing.

The question of most interest is the reason why one of the pocks began to produce an irritant ichor, the corroding or rotting process spreading through the flesh around and being followed by an attack of general blood poisoning and an eruption of minute abscesses in the skin. If you should hear any suggestion (such as is sometimes made in excusing vaccination mischances) of an insanitary state of the dwelling as the cause you may safely set that aside as being, in a medical respect, nonsense. I visited the house, and had the pleasure to find it well situated, well aired, commodious, clean, and generally healthy. Moreover, no insanitary condition of our time, supposing any to exist, is known to produce corroding or sloughing of the flesh around a vesicle on the skin or even around an open wound. In former times the similar specific disease called 'hospital gangrene' was rightly traced to the unwholesomeness of military or other hospitals, or the 'tweendecks of ships of war, overcrowded with sick and wounded; but even in former times it did not occur in private dwellings unless in rare cases when it extended to them by epidemic contagion; and at the present time the disease is probably unknown in any circumstances.

The cause of the corroding ulceration and sloughing in this case is to be sought in the nature and properties of the animal virus, namely, cow-pox, which passes under the pleasing name of vaccine lymph. In my book on 'The Natural History of Cow-pox,' etc. (London, 1887), I have collected instances of the same kind of ulceration and sloughing from the earlier history of vaccination, and might have added many more from recent times (some of them seen by myself). It is not easy to explain why that should happen in one case and not in another; but, when it does happen, you may set it down to an

inherent property of the animal virus, which is ordinarily kept latent but may be roused to activity. In the present case I believe that the long delay before pocks were fully formed, or the retention of the glycerinated cow-pox in the tissues for an unusual length of time before it was thrown out in vesicles upon the skin, is the best explanation why one of the punctures led to extensive corrosion and sloughing of the flesh around it. I cannot offer any explanation why the development of the pocks in this healthy child should have been retarded, and I do not think that anyone else could. I would ask you to note that this disaster could happen when the cow-pox matter was dissolved or extracted in glycerine, just as the same used to happen in milkers infected directly from the cow's sore paps, and in arm-to-arm vaccination.

The lesson which you and our other good friends in Halifax should lay to heart from this case, most properly made the subject of inquiry, is that the practice of vaccination, which you and I believe to be always useless, may also prove dangerous in some one child operated upon in the same way and with the same standard matter as many other infants at the same time and place.—I am, dear sir, yours faithfully.

C. Creighton, M.D.

Mr. John Walshaw,
8, Gaol Lane, Halifax."—(*V.I., July, 1901, p. 67.*)

"I maintain that there are no means of ascertaining the real beliefs of the whole profession on this question. Every Medical Officer of Health is not only bound by the terms of his appointment to keep his mouth shut against any expression of misgiving, but, in effect also, his mind closed against free inquiry. The ancient English prerogative: '*libera mens et libera lingua*,' has been filched away from the

medical profession by the action of Parliament, which has fastened the doctrine of Dr. Jenner (1798) like a yoke upon our necks. I knew of one medical man in the west country who was strong enough to hold a public office and to maintain his opposition to vaccination at the same time; and I know of two medical officers of health who have declared the same opposition, after they had resigned their offices. When Parliament is asked to justify its enforcement of this dogma, it points to the unanimity of the medical profession—a unanimity which is maintained by its own action, and would crumble to pieces the moment the sanction of Parliament was withdrawn." —(" *The Standard.*" *See also V.I., Jan. 1902, p. 174.*)

"I see it more and more clearly as a very disgraceful thing, that there should be an Act of Parliament bolstering up Jenner's poor old 18th century trumpery for all time, and creating a brutal prejudice against all and sundry who have the intelligence and the courage to examine it for themselves, and, of course, condemn it. Everything else in medicine is allowed to find its level, but this absurdity has a protective statute all to itself."—(*V.I., p. 107, Sept., 1904.*)

Dr. Creighton on the Decline and Fall of Vaccination:—

"Dr. Charles Creighton was warmly welcomed on taking the chair at the afternoon meeting, which he had kindly undertaken to do, in the absence of any new Chairman of the Council in succession to the late Mr. Hopwood, K.C. After Mr. J. H. Bonner had read a remarkable series of sympathetic letters from old and new members of Parliament, and others,

Dr. Creighton delivered an address, the importance of which, we feel sure, cannot be overestimated. It was prefaced by a masterly summary of the en-

couraging circumstances of the moment. Reference to the large number in the House of Commons who would be found ready when a division came to support our claims, was followed by the quietly emphasised observation, 'The House of Commons does not contain certain members who were our most bigoted opponents.' The significance of this circumstance was recognised by a hearty cheeer; as was also Dr. Creighton's diagnosis of an entirely changed situation in which there was promise for us. The main topic of the address from the chair, however, was not the political change, but the entire change of front of the Vaccination Department of the Government, from the scientific point of view—a change which has been gradual and subtle and secret. To make plain how important the change was, Dr. Creighton gave the history of Jenner and his friends from 1802 onwards to procure the prohibition of the old small-pox inoculation, in order to give the vaccine or cow-pox inoculation a fair field. These efforts were not successful till 1840, but then it was made an offence punishable by a month's imprisonment to use small-pox matter for inoculation. The penal section, so far as Dr. Creighton knew, had not been put in motion, but it was said if one kept a thing long enough there would be a use found for it. The use of this section now was to show how clearly, from first to last, in the Parliamentary history of this business, the inoculation of cow-pox was distinguished from the inoculation of small-pox. The one was forced upon all; the other was prohibited to all. It was more than an accident that the law was there, because the whole merit of Jenner was that he had, or was supposed to have found a better kind of matter than the old small-pox, and a matter that would not disseminate contagion. For some years past it was evident that the Medical Department had

been hankering after the old small-pox matter. Whether they were ignorant of the penal section, or whether they were bluffing us he did not know; but they had been trying to establish stocks of lymph with matter derived from small-pox in the teeth of that section. It was clear from the blue books that these men in the Civil Service, who were administer- the law under which prosecutions were instituted, were using the words 'vaccine lymph,' or the word 'vaccination' so as to comprehend the small-pox matter which had been inoculated on the calves. Referring to the secrecy of the operations, Dr. Creighton thought there was no reason why he or another should have to go as a spy to find out what had been done by public servants, and he thought they had as President of the Local Government Board a man who could take the measure of those gentlemen and bring them to book. 'What has been going on,' said Dr. Creighton, 'we hardly know for certain; but I have reason to believe that small-pox matter is widely distributed in England at the present time.' There followed a most interesting passage in which Dr. Creighton traced the indirect proofs of this statement in the effects of cow-pox, ending by saying, 'These are the indications that we have been abandoning or moving towards the abandonment of cow-pox, that Jenner is thrown over, and that we are back at the old inoculation of the eighteenth century. The question might arise, Why had they abandoned Jenner and cow-pox? Criticism always told in the long run, and there had been sufficient evidence to discredit cow-pox from its nature and inherent qualities. Then there were the new developments of what was called immunity and the search for protectives of various kinds, in which a great deal of intellectual capital was at present invested in the laboratories of Europe, and every one of the able and

zealous men engaged in these researches would tell them that their principle was the same principle as the old small-pox inoculation of the eighteenth century, and that Jenner's principle was in direct antagonism to it and was wrong. That was to say, Dr. Jenner's invention was to prevent one disease by inoculation of another, for which there was no precedent, while nothing subsequent supported the idea. These considerations had had great weight with pathologists and researchers in laboratories, so that the ground had been cut from under the feet of vaccination. That was one reason why they were moving back towards that old principle which Parliament had rewarded Jenner for superseding. Dr. Creighton cited the dissociation of Jenner's name from the Institute of Preventive Medicine, and the abandonment of the intention to include Jenner in the series called the 'Heroes of Medicine,' as evidences that Jenner's name and fame had fallen on evil days. So the criticism to which he had referred, however obnoxious and resisted at the time it was offered, had told in the long run. Dr. Creighton quoted the old objections of the Kharkoff University professors to take part in a conference to consider compulsory vaccination (copied into *The Vaccination Inquirer*, of November, from a German paper). Commenting on the singular fact that other universities had not spoken out with the same freedom, he pointed out that in these countries the compulsion of law not only pressed hardly upon parents in violating their sense of justice and of duty to their children, but also fettered the freedom of thought and freedom of speech in the medical profession."—(*V.I., Mar. 1st, 1906.*)

Dr. Edward Haughton:—

"An anti-vaccinator of the proper stamp in ten years' agitation received a liberal education. . . . . an anti-vaccinator must know something of the law

. . . . . all laws were not necessarily right. The late Professor Newman said, with reference to this particular law, that no Government had a right to enact a law which was inimical to health, or to declare that a state of health was dangerous to the community; such a law was a tyranny and created a right of resistance. The next point was, an anti-vaccinator must know something of medicine; he was obliged to study the essential principles of the healing art. Next, he must study sociology, the relation of one human being to another. He must study sanitation. Very few medical men were masters of sanitation. Men with a long string of letters to their names were not necessarily wise or well educated; he preferred the knowledge possessed by an anti-vaccinator. . . . . Jenner's nostrum was called 'pure vaccine lymph.' We deny that it is pure; the great bulk of it was variolous matter. It was not lymph, and it was not pure; it was none of those three things. There were at least twenty different microbes found in vaccine lymph, and which was the right one nobody could tell. Vaccination was a serious matter, but it had an absurd side to it."—*V.I., Nov. 1897, p. 110.*)

"The resolution was agreed to.

Dr. Haughton next moved:—

'That this Meeting desires to call public attention to the letters of Prof. Ruata, which have appeared in the *Morning Post* and the *Vaccination Inquirer*, with regard to vaccination in Italy, wherein the facts adduced by the learned Professor, to the effect that in thoroughly vaccinated villages the victims of small-pox epidemic died at the rate of from seven to ten per cent. of the entire population, prove conclusively, if such were necessary, that vaccination has had nothing to do with the comparative mildness of small-pox in this country.'

This experience with regard to Italy was not new, but it was new for a Professor ot Hygiene to come forward and say that this practice had nothing to do with the science he was teaching, and, in fact, was alien to it. Referring to the published statistics of disease in the German army, Dr. Haughton cited the testimony of a retired colonel from that army, that small-pox was really prevalent, and the whole affair seemed to be an instance of disgraceful official lying. Even severe cases of small-pox were commonly entered in the list as skin diseases, and the like. But in Germany, as in England, the medical profession were banding together to maintain at all hazards an old superstition, whose bottom had been knocked out. It was only another phase of 'the confidence trick.'"—(*V.I., March, 1898, p. 159.*)

"As one who, in this matter, has had the advantage of considerable experience, I venture to lay before you a short statement of what appears to me to be the *status quo* on looking back to the beginning of this controversy . . . . . I cannot discover that there has been any period during the last hundred years, when the practice of inoculation with animalised virus has not provoked opposition, and the severe criticism of intelligent persons, many of whom have belonged to the medical profession. I am quite willing to admit that latterly the number of medical men who take the unpopular side has diminished, but this seems to be rather from sheer weariness of an endeavour to effect a reform in an unpractical way, than from any change in their opinions or any new light arising from the advance of science . . . . . I do not propose, on the present occasion, to say anything about the noxious effects which I believe must always follow from the inoculation of morbid poisons into highly organised creatures, and especially human beings. But I may say, *en passant*, that the evidence

of disasters is no longer contested; but is simply excused as relatively small compared with the alleged benefits conferred. There only remains, therefore, to be considered the claim which is made on behalf of vaccination, that its practice is attended with a saving of human life. Reference to the general death rate, however (say for any whole year in which small-pox has been epidemic), completely disposes of this fallacy, which takes no account of the vicarious substitute of one kind of zymotic disease for another, or of the contemporary increase of various cacheries. How then shall we imagine that the members of a liberal profession, which at the beginning of every session, exhorts its pupils to cleave earnestly to truth and utility, can possibly continue to maintain an attitude more like that of a league of trade unionists than of the upholders of genuine science? I am not blind to the well-deserved reputation of many members of my profession for philanthropy and critical acumen, and I, therefore, counsel you to appeal to such that they should come out of Babylon, and not be partakers of her sins. The stamina of the nation is at stake for many generations."—(*V.I., April, 1905, p. 8.*)

Dr. Walter D. Hadwen, M.D., L.R.C.P., M.R.C.S., F.S.A. (Gold Medalist in Medicine and Surgery):

"Dr. Jenner had no qualification for any scientific research. He never passed a medical examination in his life. The medical faculty took up his nostrum not from any faith in it, but because small-pox inoculation was so notoriously dangerous, and had brought them into such illrepute, that it was essential to find some substitute. It was an age of medical superstition and uncleanly drugs . . . . . The Glasgow epidemic began with a vaccinated person. Every epidemic begins with a vaccinated patient. It is from such that the unvaccinated are infected.

Note the Sheffield epidemic in 1887 : it began with a vaccinated person. Sheffield was vaccinated up to 95 per cent. of the population, and well vaccinated. . . . . But Sheffield had neglected sanitation. . . . . Revaccination did not stem the torrent; but God in His mercy at length opened the windows of heaven and with its waters washed away the foulness. Gloucester, which had largely discarded vaccination, but had also, in one district especially, shamefully neglected sanitation, met a similar disaster in 1893, and the epidemic ceased in the same way as at Sheffield. . . . . The epidemic started, as usual, with a vaccinated person. . . . . They are fond of quoting Germany. Let me tell you there are Anti-Vaccination Leagues all over Germany, and leading doctors strongly on our side. Nor are the people so oppressed by it as here. It can be evaded there by paying a fine of one shilling."—(*Lecture in Trades Hall, Glasgow, about March, 1901. See Hunter's Hygienic Treatment. See V.I., May, 1901.*)

"The unquestionable fact still remains, that Dr. Gayton, a pronounced official pro-vaccinist and late Superintendent of the Homerton Small-pox Hospital, informed the Royal Commission that after an experience of 12,000 cases, his tables showed 'that primary vaccination was not protective up to any age." Anyhow, here is the striking illustration referred to above, namely : that of Daisy Sabin, aged four years, living at 5, Linden Road, Gloucester, who contracted small-pox in the confluent form, after being successfully vaccinated in six places (not three as stated by Dr. Coupland), by a specially appointed vaccine operator three weeks and three days previously, and died. On the other hand, her sister, aged only sixteen months, unvaccinated, had a 'severe attack' (which is an exaggerated description) and—recovered. Why did Dr. Coupland omit that last word in his report?

Would it have made the contrast too striking? This unvaccinated child was not even pitted. . . Ever since the cunning Jennerian shuffle originated by the Apostle of vaccination at the bedside of Lord Robert Grosvenor, who narrowly escaped with his life from a confluent attack of small-pox, after being vaccinated by Jenner but a few months previously. We have been taught that even if cow-pox will not protect from small-pox, it will certainly mitigate the disease, and ward off all fear of mortality. Now how do Dr. Coupland's own figures meet this plausible assertion? He tells us that of the sufferers that have been vaccinated, 29 had malignant small-pox, and every one died; 223 had confluent small-pox, of whom no less than 70 died. Here is a total of 252 successfully vaccinated persons attacked with the worst types of small-pox, scoring a fatality of 39·3 per cent.! Besides these, there were the cases of 'alleged vaccination,' that is, cases where the patients themselves declared they had been vaccinated, but owing for the most part to the vaccine scars being covered by the eruption, and therefore said not to be recognisable by the medical man in attendance, Dr. Coupland cautiously places them in a separate list. There were 40 of such cases, with 16 deaths; a fatality of 40 per cent. They included seven malignant cases, all of whom died; 21 confluent cases, with nine deaths. That is, 28 cases of the worst types of small-pox in alleged vaccinated persons, and 16 deaths—the enormous fatality of 57·1 per cent. They might well be placed in a separate list, under the heading of '*alleged vaccination.*' Why did not Dr. Coupland search the vaccination registers and make sure about their vaccinal condition? What about the unvaccinated death rate after this? . . . . Of the 89 persons vaccinated within a fortnight of taking small-pox, no less than 27 died. . . . Where, I ask, does the doctrine of

'mitigation' come in? Is this the sort of thing that conscientious men and women are being persecuted and imprisoned for? Is this what we are paying hundreds of thousands of pounds annually out of the public rates to maintain? . . . . . not only this man, but the one who drove the patients from their homes to the hospital, as well as the man who carried the infected bedding to the disinfecting apparatus, and even the nurse who attended the patients in the hospital during its early and worst period, all declined to be revaccinated, yet none contracted the disease. On the other hand, at least one of the recently revaccinated hospital nurses took small-pox."—("*Small-pox at Gloucester*," *by Dr. W. R. Hadwen, M.D., L.R.C.P., M.R.C.S., &c.*)

"As a medical man, I assert that vaccination is an insult to common sense, that it is superstitious in its origin, that it is unsatisfactory in theory and practice, and useless and dangerous in its character. . . . . And, furthermore, I assert that if you are going to commit such a very serious operation as this, viz.: to take this filthy virus and inoculate it into the human being . . . . then you ought to be prepared to give a guarantee first that it shall effect that which you profess it will effect; and secondly, that it shall produce no injurious results. But I defy any medical man in the Kingdom to give a guarantee to that effect, and if no guarantee can be given to that effect what right I ask has the Legislature to enforce it."—(*Lecture at Picton Hall, Liverpool, May, 1902.*)

"Vaccination possesses no scientific basis. Vaccination has its origin in superstition. Vaccination has increased infant mortality. Statistics of small-pox epidemics prove vaccination to be useless."—("*A Physician's Views of Vaccination*," *V.I., Feb. 1896.*)

"Syphilis has increased fourfold in young people since the passing of the compulsory Vaccination Act." —(*Lecture at Gloucester, January, 1896.*)

"Probably never since the days when the Keighley Guardians chose incarceration in York Castle in preference to the sacrifice of their consciences, or the men of Leicester burnt the Vaccination Act amid shouts of execration from 30,000 pairs of lungs, has the anti-vaccination movement created so much popular excitement and interest as it is creating at the present time. All over England brave men and women—men and women who are known to be foremost in the path of righteousness, and who have ever been first in their desire to show respect for the laws of their country, are being constrained under a grave sense of duty . . . . the protection of the offspring they love, to refuse to submit their children to the imposition of what they believe to be a superstitious and dangerous medical rite, and are suffering the spoiling of their goods, and even a prison cell, rather than accept a creed they cannot endorse."—(*V.I., January, 1896, p. 140.*)

"The whole medical profession has been groaning for years under the burden of the disastrous failures in the field of protection, which all the specious excuses of inventive minds cannot get rid of. The cry which passed the Vaccination Act, and which brought £30,000 into Jenner's pocket, is heard no longer."—(*V.I., March, 1896, p. 169.*)

"When the doctors were called upon to explain how it is that vaccination works its alleged benefits, one after another they declared they could not explain it, that they did not profess to explain it, but that they judged of vaccination by its results. But that was just the way the people judged, and they were as capable of judging by results as any doctor in the land. The people see that vaccination does kill

children, and they see that vaccinated people do take small-pox, and the two together are judgment enough for them."—(*V.I., 17–4–96.*)

"Dr. Creighton, in his masterly address, told them that members of Parliament and the people generally want educating upon this matter. That was quite true, for they knew nothing about it. But unfortunately there was nothing to teach them, because there was nothing in it; the whole thing was a pure superstitution, and all we could do was to make them unlearn what they had learned already. . . . . Great reforms were not carried out by educated men, but by the working classes of the country. The great questions of the day were thrashed out in the workshops among the artizans of England, and it is from them . . . . that questions burn up, and members of Parliament would vote for them and carry them as soon as they bring votes . . . the whole vaccination question must be made a question of votes; when we have done that we shall carry it, and not before."—(*V.I., p. 112, Nov. 1897.*)

"At Gloucester, not a single unvaccinated person took the disease from May to September, all the cases were those of persons who had been vaccinated and revaccinated. A few unvaccinated children took it from September to February, but the vast majority were vaccinated cases. It would not catch on with the youngsters who ought to have been 'decimated.' At last it caught on in an infants' school, and then it was fearful. . . . The teacher of the school was first struck down by the disease, and she had been vaccinated. In a few days fifty infants were struck down with small-pox. All the rest of the scholars were unvaccinated, but none took the disease until the school was closed. . . . Until it struck that infant school, the Black Hole of Gloucester, there was no epidemic. . . . . The drains had been

blocked in all directions. The main sewer was ordered to be laid at a lower level to afford a better fall. The forty or fifty sickly children were packed into the small-pox hospital, two, three and four in a bed, and some of them were kept in that toy hospital for six weeks without a drop of water upon their bodies, without any antiseptic lotion for their eyes, insufficient nurses, and vermin crawling over the beds. The children began to die like rats in a hole. The doctors wrote joyfully to the London papers about the deaths of unvaccinated children. . . . Why was there not a Government Enquiry, in compliance with their request? There was an enquiry at Maidstone into the typhoid epidemic, though the cases were fewer than in Gloucester. There was no miserable superstition with its medical prestige, to be upheld at Maidstone as there was at Gloucester. And so they baulked enquiry. Every case taken into that hospital until April 25th, was taken out a corpse. The municipal authorities were appalled . . . they wrote to the Local Government Board, and Dr. Brooke came and introduced sanitation, baths were bought, the patients were washed, windows were opened, and the death rate declined from 54 per cent. to only 8 per cent. During the last twelve months, with an independent anti-vaccination party in the Council, there had been more sanitary work done in Gloucester, according to the Medical Officer of Health, than had been effected in the previous ten years. They had cleared out the miserable places where small-pox was generated. There were six to nine small-pox cases in houses with only two bedrooms, and manholes before the front doors. When the people were asked why they did not open their windows, the answer was, they dare not because of these stinking manholes. The want of water led to supplies being drawn from the river

Severn, and the consequence was that typhoid fever broke out. Insanitary conditions lay at the bottom of the whole thing; it was not a question of vaccination at all. There were two hundred cases where vaccination and small-pox went on together. What relation has cow-pox to small-pox under such conditions as that? There were a hundred re-vaccinated patients. One old soldier had been vaccinated eight times, and then he took small-pox. A nurse in the lunatic asylum who had been vaccinated in infancy, took the disease. When the revaccinated nurses took small-pox the bubble was completely exploded. Mr. Pickering's hydropathic nurses were safe, though unvaccinated. The men who took the patients to the hospital and took the infected clothes to the furnace were not vaccinated. The partisans of vaccination never rested until they had sacked those two men; it was such a disgrace and humiliation to have men intimately mixed up with small-pox, unvaccinated, and yet they would not take the small-pox. . . . But they could not get a vaccinated man to run the risk, not a single man would apply for the appointment, so they had to keep this man on who was not vaccinated and would not take small-pox. All the facts about the Gloucester epidemic had been published, and he had challenged Dr. Bond in the sum of £50 to disprove a single statement, but he had not dared to accept the challenge. The vaccination law was framed upon a deliberate falsehood by Dr. Jenner, upon statements which had never been proved. As vaccination was founded upon a fraud, and seeing that the Royal Commission had exploded it, and practically owned that it was based upon a lie, we say: 'Give us back the liberty you filched from us.'" —(*V.I., p. 113–114, Nov. 1897.*)

"Vaccination gone Wrong."—A story of the century.

—By Dr. Hadwen:—

"'Vaccination gone wrong' is the professional label which has been attached by a renowned medical authority to certain calamitous results following the insertion of that precious 'life preserving fluid' which the impecunious Jenner declared in his petition to the House of Commons in 1802, 'admits of being inoculated on the human frame with the most perfect ease and safety.'

More than half a century subsequent to the above bold, infamous, lying bid for the relaxation of a nation's purse-strings, Sir John Simon had the temerity to publish his well-known and oft-quoted statement: 'I must say that I believe it to be utterly impossible, except under circumstances of gross and punishable misconduct, for any other infection than that of cow-pox to be communicated in what pretends to be the performance of vaccination.'

But long before these statements were made, and all through the long years since, ghastly consequences of vaccine inoculation have been again and again recorded by honest, unbiassed observers, only to be met with bluff, excuse, sarcasm, contempt, and flat denial by the apostles of the dairymaid's creed, which has been endowed by Act of Parliament, and with which professional prestige of nearly a century is closely linked.

This game of magnificent bounce was begun by the never-to-be-forgotten Jenner in the earliest days of the promotion of his stupendous quackery. Three years prior to his Parliamentary petition, by which he succeeded in diddling the public coffers of the first instalment of £30,000, he had loftily written to his friend Gardner: 'I am beset on all sides with snarling fellows, and so ignorant withal that they know no more of the disease they write about than the animals which generate it.' This, too, as a comment upon a communication to a medical journal by

a London physician of high repute, who had remarked on the 'loathsomeness of the disease' which had been communicated by the vaccine lymph of Jenner sanction, and who had narrated an instance in his own practice where, in spite of the most horrible cow-poxing, his patient had nevertheless contracted subsequently the very disease he was supposed to be protected against.

Medical witnesses have never been lacking when vaccine disasters have to be explained away, or excused, or minimised, or denied. Faithfully they follow one another into the witness-box like soldiers under order of their superior officer. Faithfully they repeat the old, old stories invented by Jenner a hundred years ago to account for his mishaps. The lymph must have been 'spurious'—it must have been kept too long—or taken too late—the habits or surroundings of the family were questionable—some mischievous interference of the father or mother, the grandfather, the grandmother, or even the patient—the suspicious contiguity of the pigstye—the probable condition of the drains—the peculiar ailment of the sick man round the corner—the disease in the same street, perhaps hundreds of yards away, which the patient had never come in contact with, all these are pressed into this 'scientific' service, and failing all else, eminent medical officials under the pay of that mysterious, awe-inspiring organisation which goes by the name of the Local Government Board, have not hesitated, as in the case of Emily Maud Child, of Leeds, to blast the character of a pure and honest home in order to 'save vaccination from reproach.'

The average of one death per week has been regularly confessed to by the Registrar-General until the last published official return, the reduction in mortality then being strikingly coincident with the big default in vaccination which Mr. Chaplin so

seriously deplored. How many similar deaths remain unconfessed is an arithmetical problem which will never be known this side of the grave. But, in spite of the deliberate assertion of the High Priest of the vaccine cult in 1857 that such things are 'impossible except under circumstances of gross and punishable misconduct,' no medical operator has yet been indicted for manslaughter; the steady deathroll goes on; the grim story closes, so far as law is concerned, with the clods upon the coffin lid; the friends go home to weep; the vaccine god smirks in his temple; and Christian devotees still bow at his death-dyed shrine.

At the Coroner's Court at Old Normanton on Saturday, March 3rd, another ghastly story connected with this weird superstition (reported in the last issue of the *Vaccination Inquirer*) was methodically laid bare.

Joseph Donovan, a healthy well-built man of twenty-one, enlisted as a private in the King's Own Yorkshire Light Infantry, in the month of December, 1899, and in accordance with the iron rule of army chiefs, who are permitted the privilege of formulating Acts of Parliament for themselves, the aforesaid Joseph Donovan was duly inoculated with the required dose of that remarkable improvement upon the nostrum of poor old antiquated Jenner—pure glycerinated calf-lymph.

Now, pure glycerinated calf lymph cannot do any harm. That's a fact. If the medical profession is united about nothing else it is quite agreed about this. And what the whole medical profession is unanimous about must be true. We know that the whole medical profession was once upon a time united as to the necessity of bleeding people to death in order to keep them alive. And once upon a time it was likewise united in the certain and sure view

that the only way to preserve sound tissues was to ruin them with extravagant doses of mercury; and there was a day when it unitedly agreed that the only way to sustain the force of a heart galloping under the stimulus of fever was to excite it still further with inordinate doses of brandy and port wine.

The unanimity of the unanimous was worshipped then as now.

But that was years ago. We live in more hallowed times. We live in days when all the medical profession is united upon altogether new discoveries. It is unitedly of opinion, for instance, that if a maceration of the contents of a mad dog's backbone be made at the magic palace of the Pasteur Institute, and injected into the vessels of a timid biped, the latter will be preserved from madness. And doctors may have been unitedly wrong years ago—they cannot possibly be unitedly wrong now. It is no use saying that nearly one thousand persons have died from the very madness they had already been protected against. It is true enough. But these are merely incidentals—insignificant blots upon the pathway of perfectionism.

We must remember that the united opinion of the medical profession in these days is as safe and sound as the doctrine of the infallibility of the Pope, and can be as confidently relied upon as the voice of all the Cardinals of the Roman Inquisition in the Convent of Minerva, when they pronounced Galileo a heretic for holding the Copernican doctrine of the movement of the earth. Even though the death-rate from hydrophobia be the same as it ever was, and the mortality and death-rate from diphtheria have increased since 'scientists' of this *fin de siècle* period took to tapping the vessels of worn-out horses which have been poisoned with diphtheritic virus, and inoculating little ones with the resulting fluid with the

view of curing sore throats; nevertheless, we must not suffer the delusion that the united voice of the medical profession is mistaken. We must try to think of the millions who *might* have died if these new 'discoveries' had never been made. Are not these days the days of science and of advancement? And do not wealth and emoluments, and professional glory, and knighthoods, and baronetcies, all lie in the subtle pathway of inoculation crazes?

And so we come back to the inoculation of glycerinated calf lymph and to the story of the soldier who was revaccinated with it by order of the Army regulations, and in obedience to the united voice of the medical profession.

Now, whether the particular brand of pure glycerinated calf lymph which was used in the present instance would have protected Joseph Dovovan from small-pox or not, it is impossible to say. Like the result achieved by the old man's quadruped whose diet was daily reduced in the hope that it would subsequently exist upon nothing, so Joseph Donovan did not live long enough to test the protecting virtues of the discovery.

The close of his life's history is summed up as follows: He enlisted as a soldier in Her Majesty's army. He was vaccinated according to army regulations. He was taken ill immediately after the army surgeon's operation. He was admitted into the Army Hospital at Normanton Barracks. And he died—all within the brief space of two months.

His brother who gave evidence at the inquest, said that the deceased attributed his trouble to the vaccination, and witness declared he suffered pain ever since the operation; that he lost his sight; that he broke out in a horrible rash before he died; and 'gradually presented a shocking appearance.'

A private in deceased's regiment who had en-

listed and been vaccinated at the same time as his dead companion in arms, bared his own upper limb for the jury's inspection, and the journalist of the *Derby Daily Telegraph* remarks, 'it presented a revolting appearance.' Witness further stated that though alive, he himself was still under medical treatment.

Then came the turn of the medical experts to elucidate the mystery. Dr. W. J. Howarth, Medical Officer of Health for the Borough of Derby, sat first in the witness chair. He had been called in to see the deceased under the supposition that he was possibly suffering from small-pox, but he came to the conclusion after 'a careful diagnosis' that the 'condition was septicæmic,' which is the crack-jaw Latin name for blood-poisoning. Dr. Howarth proceeded to characterise it as a case of '*acute pemphigus*.' It was 'a very rare disease,' he said, its pathology he 'would not attempt to explain;' the cause of it he 'did not know,' but 'he certainly never at the time thought of associating it with vaccination.' When pressed by Mr. Schultess Young for a little scientific information such as might be expected from a well-paid medical official presumably versed in diagnostic intricacies, he flatly declined to discuss the case any further; it had nothing to do with his duties as Medical Officer of Health.

Dr. Howarth made way for Dr. Clapp, a local military surgeon who held the rank of Lieutenant-Colonel in the British Army. This gentleman had vaccinated the deceased. He was anxious to impress upon the jury that he 'would swear that his lancet was perfectly clean, as he attended to all his instruments himself, the lymph was glycerinated, and was made at the Vaccine Institute, Aldershot.' Therefore, it could not have been the doctor, nor could it be the lymph. When a mild interrogatory was put to him

as to how the arm of the deceased man's companion, which the jury had just inspected, came to be so bad, the experienced vaccinator could only suggest that it must have been due to 'scratching,' But he admitted it to be a fact that the late Dr. Erasmus Wilson, who was 'a great authority upon skin diseases' had declared that acute pemphigus was sometimes caused by constitutional irritation set up by the introduction into the system of vaccine. When further cross-examined by Mr. Schultess Young as to whether he could suggest any other apparent cause for this poor fellow's death if vaccination had not caused it, Dr. Clapp bluntly answered: 'No, I can't.'

A further medical witness, Dr. Luce, holding the rank of Army Captain then gave evidence, and by careful management in the hands of Counsel, the interesting incident was carried a step further. Dr. Luce declared that the immediate cause of death was *septic pneumonia*, which had followed upon acute pemphigus. He could give no definite opinion as to whether it had arisen from vaccination, but he thought it *might* have been due thereto. The cases of pemphigus which he had read about showed that the people most liable to it were butchers or others having to do with animals, and when Counsel trenchantly asked: 'That is rather singular is it not, seeing this man was vaccinated with calf lymph?' witness, evidently taken by surprise, cautiously replied: 'I think it has some bearing on the case.' He quite agreed with Mr. Schultess Young that there should be an enquiry as to the source of this particular lymph. But turning to the Coroner he timidly remarked, he would not like to go so far as to say that these cases of pemphigus arose from something in the lymph supplied at Aldershot.

The jury arrived at the conclusion that deceased died from pneumonia secondary to the pemphigus

following vaccination; adding as a rider, that the military authorities at Aldershot ought to institute a particular enquiry as to the source of this particular lymph, and to see if better precautions could not be taken in the future. They further expressed their belief that Dr. Clapp was quite blameless in the matter.

Thus ends one more tragedy in the scene of glycerinated calf lymph, which is being played before the British public in compliance with the wire-pulling of the nondescript imperious departmental officials of Whitehall.

Humpty-Dumpty was to have been put together again by the infallible amalgam of glycerinated calf lymph. The fears of English fatherhood and motherhood were to have been set at rest for ever by the addition of a little glycerine and water to the morbid secretion of cow-pox pustules, artificially generated upon calves' abdomens. Horse-pox, horse-grease cow-pox, spontaneous cow-pox, glycerinated cow-pox, and every other kind of animal pox had been weighed in the balances and had been found wanting; now cow-pox, glycerine, and—water was to dispel anxiety for ever.

Mere glycerinated cow-pox calf lymph had long ago proved a failure, and the Sanitary Commissioner for Bengal declared in the *Indian Lancet* of March 1st, 1897: 'Glycerine is a nutritive medium for the growth of putrefactive and other germs, and being fluid, the germs soon pervade it throughout; and as a fact, this preparation (glycerinated lymph) in India soon becomes putrid and *septically dangerous.*' The Sanitary Commissioner for Madras was no less emphatic when he wrote in his official Report for 1894-5: 'This messing with vaccine lymph mixed with glycerine is not only an expensive procedure but disappointing in its results.'

So something fresh was requisite. The pathway of salvation was found in—Water. Calf lymph, glycerine, and—water. This is the new 'discovery.' It cannot fail. It cannot go wrong. The united voice of the medical profession has bestowed upon it its blessing. Let us make no mistake about it. It was not the new form of glycerinated calf lymph which did that little child to death in Mile End recently. No. It was *vesicular dermatitis.* Neither was it pure glycerinated calf lymph which robbed the army of a soldier, a mother of her son, a loyal and patriotic Englishman of his life. No. It was *acute pemphigus.* A mysterious disease. Medical witnesses of high official standing, declared they knew nothing of its pathology; nothing of its cause. They were only acquainted with its *name.*

Do they know anything about calf lymph? Can they tell us the pathology of that?

Well, whatever it was, *Joseph Donovan is—dead.* (*"Vaccination gone wrong." See V.I., May, 1900, p. 25.*)

"Many have been the attempts to whitewash the hideous charnel-house where lie the ghastly relics of the cruellest and most loathsome superstition of modern times."—(" *Dorking Daylight.*")

"I am surprised at Dr. Knox Bond ridiculing the 'quack measures' of Mr. Pickering, seeing that this was practically the treatment adopted by Dr. Brooke. Mr. Pickering published an authentic list of 200 unselected cases he treated by warm baths (to which permanganate of potash was added), with a death rate of only 10 per cent. Surely this was better than the percentage of 54 going on at the Hospital. Moreover, I have a list of 260 cases of small-pox (certified as such by medical men), treated by the oil of Captain Fielden (the composition of which was never kept secret), and there were but four deaths—

barely two per cent."—("*Medical Times*," *8th Sept., 1900, p. 563.*)

At a Conference in Caxton Hall, Westminster, 18th March, 1903:—

"Dr. Hadwen then opened the discussion with a stirring speech. He thought the case which had just been brought to their notice was certainly of a sad description, yet it was but one out of a vast number which they could find up and down the kingdom. No doubt it would be argued away by medical men, but after all was said and done it came back to this, that the child was healthy before it was vaccinated, and that afterwards evil took place and continued. They had met that afternoon to confer with one another as to what should be done. He thought they should first go to the root of the matter, and ask, 'what is vaccination?' They had asked for a definition from Parliament, and from their expert opponents again and again, but could not get it. He defined it as the inoculation of a distinct and definite disease (cow-pox) into the human body, and the only other disease to which cow-pox bore any analogy in human beings was the vile disease of syphilis. (Shame.) The thing was bad and unscientific in its conception, and dangerous and useless in its results, and therefore they said the whole of the beastly business should be banned tooth and nail. (Cheers.) They would take anything the Government liked to give them in the way of compromises, but they would never lessen their demands for the entire abolition of the compulsory laws. (Applause.) The conscientious objectors' clause was a ridiculous measure, but even that had been rendered futile in many parts of the country by the action of bigoted magistrates, who insulted applicants in defiance of the distinct terms of the Act, and the published opinions of its promoters.

(Hear, hear.) He thought that parents should be allowed to record their conscientious objection when registering the birth of the child—(cheers)—and he hoped the Members of Parliament present would raise this point when the Government brought forward their Bill for the continuation of the Act of 1898. (Cheers.)"—*(V.I., 5–4 03.)*

SECOND DAY'S PROCEEDINGS.

"*What is Efficient Vaccination?*—Dr. Hadwen's paper on this subject was as follows :—

The history of vaccination is a history of shuffles, and nothing is more marked in the whole realm of Shuffledom than the question of vaccination efficiency. 'Efficient Vaccination' is a phrase only recently coined. For many years the favourite expression was 'successful vaccination.' The latter term was invented by the Local Government Board as their special trade mark of a good quality article. When four cicatrices of a certain total area, each cicatrix of a circumscribed, foveated, regular, and all the rest of it, description, were, by a lucky hit—for it was all a question of luck—planted upon the child's arm by the Public Vaccinator, it brought him in an extra bonus. Inspectors were appointed by the Local Government Board to the easy and lucrative post of perambulating the country for the purpose of calling upon the Public Vaccinators and examining their books. The mothers of one or more children with the requisite number of ideal scars were usually bribed to appear at the Vaccination Station at a certain hour, or the Inspector visited them at their homes and examined their children's arms.

'*Successful Vaccination.*'—All the rest of the cases in the Public Vaccinator's book, marked by him 'successful,' were taken for granted, and an award for 'successful vaccination' was the result, and the

fact was duly advertised in the local newspapers and the medical press as a proof of the splendid way in which Dr. So-and-So did his work. The proud mothers forgot the sorrows and suffering, the sleepless nights that those ugly scars signified, and rejoiced that their children were "successfully vaccinated,' and *ergo* 'protected' against small-pox. For many years, however, ugly rumours floated about that 'successfully vaccinated' persons caught small-pox quite as easily as the unvaccinated—some said more easily. But the answer was invariably forthcoming in such cases that the vaccination was imperfect, the marks were too big or too small, total area too great or insufficient, shape was invariably wrong, and foveation unsatisfactory—(laughter)—and as the records describing their original quality which had fetched in the bonuses were a closed book, under the safe guardianship of the Public Vaccinator himself, comparison could not be made, and there was only the attending doctor's word of critical denunciation to take for it. If the marks in a small-pox stricken patient were covered by the disease, the patient had 'never been vaccinated at all'—small-pox hospital officials made no secret of that fact—and thus a magnificient statistical castle which defied all the artillery and battering rams of anti-vaccinators was steadily built up. Four marks vaccination, thus protected by its many and subtle safeguards, was still declared to be 'successful,' and in spite of all suspicion continued to fetch in the bonuses: and every Public Vaccinator was ready to assert with a whisper that although he had heard of disasters in other Public Vaccinators' practice (he 'wouldn't mention names') yet all his 'successful cases' were 'successful,' and he defied anyone to prove that any case that he declared to be 'successful' had ever taken small-pox. For obvious reasons no one could

prove it but himself. It was heads I win, tails you lose. The records which alone could convict him were safely in his own keeping. (Cheers.)

Marson's Table.—We all know the triumphant table of Marson, of the Highgate Small-pox Hospital. Every medical student knows how this famous old armour-plated battleship shot its seven-pounders on lecture days. All the one-marked patients went bang; two marks were a bit safer; three marks much more sure of saving their bacon; four marks—small-pox couldn't kill them, do what it would, the patients led a charmed life. That was 'successful vaccination.' And everybody swallowed the dainty statistical morsel, until a few inquisitive anti-vaccinators badgered the compiler with some awkward questions, and then it was discovered that this worthy gentleman's patients had been largely dying in his small-pox hospital of some disease other than small-pox, and these diseases—wonderful to relate—increased in inverse ratio to the number of marks on the arm. The one-marked patients died of genuine, old-fashioned, thorough-going small-pox, but the four-marked patients died of—well, pnuemonia, bronchitis, anything, it didn't matter what, so long as it was not the disease they were 'protected' against. Of course, a 'successfully vaccinated' mortal could not be allowed to die of small-pox. (Cheers and laughter.)

Dr. Gayton's 10,000 Cases.—When the Royal Commission got to work the vaccinating experts bravely turned up with their statistics to give evidence—1 mark, 2 marks, 3 marks, 4 marks. They were all very funny, but the funniest of all was Dr. Gayton. He came up laden with a long story of 10,000 cases. He looked as spruce and plim as any cock in a farm-yard when he entered that examination room; he looked the most deplorable, bedraggled specimen

of humanity ever glued together when he came out. (Laughter.) Sir Wm. Collins had knocked the starch out of his 4-mark ornamental frill, and doubled his best statistical beaver into a cocked hat. (Laughter.) 'A good area' was a most important point, he declared, but still he thought, when cross-examined, you might have a good scar which was 'exceeding minute.' If he had one good mark and three imperfect ones, he sometimes lumped them together and called them two good ones; but generally he only registered them as one. What became of his marks in the end I don't think anyone has ever yet discovered; like the ten little nigger boys—they finally collapsed. (Laughter and cheers.)

Dr. Bond's Achievements.—Now the public know nothing about Blue-books, and care less, but they have an awful lot of faith in 'what my doctor tells me,' and by reason of interested officials carefully taking the 'successfully vaccinated' patients out of the count by one ruse and another as fast as they fell in, 'successful vaccination' still contrived to hold its head up. But 'successful vaccination' in 1896 came home to roost for the last time. The glory of that event does not rest with the anti-vaccinators; no, the whole sole credit of it belongs to the very best friend the anti-vaccination cause ever had—Dr. Francis Thomas Bond, the hon. sec. of the so-called Jenner Society, of Gloucester. He is what may be termed the champion excuse manufacturer for the vaccination party. It was none other than he who contrived to spoil the whole bag of tricks that had proved such a a profitable game for half a century. It happened in this way: A little girl, aged 11, named Bessie G. Long, contracted small-pox during the Gloucester epidemic, and died. Dr. Liston had examined this child's arm, and said she did not require re-vaccination as she had four such good marks, it was impossible

for her to get small-pox. This was a beautiful case of 'successful vaccination'! (Laughter.) Her sister, Annie Louisa Long, aged 13 years, also had a beautiful 'successfully vaccinated' arm, and Dr. Liston passed the same remarks about her. Dr. Bond also saw this child and examined her arm, and made the following remarks: 'He should like to see every person's arm in the city of Gloucester like that one. He did not suppose she ever would have small-pox, but if she ever did she would have it very slightly.' But she did develop small-pox, and she had it very heavily. The immediate result of these well advertised facts consisted in Dr. Bond promptly reducing his previously published protection limit from 14 years down to 10 years, so as to come within the range of these ugly blows to the pretty theory of 'successful' bonus vaccination. Originally the protection limit of the 'successfully vaccinated' had been a lifetime. Dr. Bond and Co. had prudently reduced it to 14 years some time before, in order to be on the safe side of the hedge. During the last five years it has been successively reduced year by year to the vanishing point.

The Case of Daisy Sabin.—There arose another case—that of Daisy Sabin, aged 6, successfully vaccinated in six places by a specially appointed Public Vaccinator. She took small-pox three weeks after, and died from it. So Dr. Bond went a step further, and declared she had not been vaccinated long enough—12 to 14 days' incubation limit must be given up—a whole month was necessary in future to cover such nasty cases as that of Daisy Sabin! Then an old soldier, successfully vaccinated no less than seven times in the British Army, had the audacity to catch small-pox—(laughter)—and apparently in sheer desperation, Dr. Bond flung all the traditions of vaccination overboard, and the next interesting item

which appeared in the course of Dr. Bond's interminable newspaper letters, consisted in his declaration that where everybody was making a mistake was in supposing that 'successful vaccination' meant efficient vaccination.

'*Successful' not efficient Vaccination.*—For 'successful' did not imply anything of the sort! This we had been perfectly aware of all along; it had taken Dr. Bond and his fellows a quarter of a century to find it out. The cry caught on in medical circles everywhere. That blessed bit of original coinage has turned out to be the most valuable in the vaccinator's mint. It is now admitted in medical officialdom that 'successful vaccination' was simply the old name for a vaccination that brought in the bonuses, and that it possessed no other significance; it served its day and generation, and now that the odd eighteen pences are no longer craved after, in view of the magnificent doles granted to the unselfish public vaccinators out of the pockets of the unhappy ratepayers by the Local Government Board bureaucracy at Whitehall, not only for vaccination, but for revaccination likewise, we hear no more about '4 marks,' or 'bonuses,' or 'successful vaccinations,' for each man doeth what is right in his own eyes, as it was in the times of the Judges of Israel; it makes no difference—1 mark, 2 marks, 3 marks, or 4 marks, it is all 'vaccination' now. Public Vaccinators know nothing about 'successful' or otherwise, they are too busy to discuss such minor details, and Boards of Guardians throughout the country are compelled under the threat of a mandamus to foot the Public Vaccinators' heavy bills, 'asking no questions for conscience sake.' In the meanwhile, the muddle and humbug is growing apace. Nobody knows how long vaccination will protect—nobody knows how many marks are requisite; nobody knows what shape they ought to be; nobody knows what

measure of mitigation can be assured; and nobody cares. The Public Vaccinator stands as High Priest by the Moloch Throne; the policeman's baton, and the magistrate's benediction, and the Local Government Board's impertinence, and the ratepayer's pocket form the bodyguard and background to the picture. (Laughter and cheers.) Only the other day 587 men in connection with the Metropolitan Asylums Board were vaccinated by a specially appointed Medical Officer in two places only, at a cost of 35s. per head. 'Successful vaccination' was as dead as Queen Anne, two scars seemed sufficient to 'protect' them, and the Local Government Board 'laid low and said nuffin'.' (Laughter.)

The I.V.L.'s Demand and Ours.—In the midst of all this confusion and contradiction comes the Imperial Vaccination League imploring the Government to define 'what is efficient vaccination!' Considering that this conglomeration of lords and bishops and brewers and doctors is formed to educate the public, and is the self-constituted highest authority on vaccination in the universe, why on earth doesn't it define 'efficient vaccination' for itself? It is a mistake, we are told by Dr. Bond, to suppose that 'successful vaccination' means 'efficient vaccination,' but, strange to say, he was one of the deputation of the Imperial Vaccination League that waited upon Mr. Long recently, and which naïvely confessed its sublime ignorance of what 'efficient vaccination' meant. If these highly respectable and professedly learned authorities don't know what it is after a century's experience, do they really think the poor hard-worked clerks upstairs at Whitehall can possibly tell them? Well, they might as well ask Mr. Brodrick to explain the meaning of an army corps! (Much Laughter.) Do they really think Mr. Walter Long, for instance, is capable of

solving the riddle? That riddle may trouble him as the hand-writing upon the plaster of the wall of Belshazzar's palace troubled the King and his courtiers, but when all the magicians and soothsayers of King Edward's Court fail in their answer, what if a 'Daniel come to judgment,' propound it as Daniel did! (Cheers.) But it is quite comical to notice the agonising anxiety which has suddenly been aroused by all vaccination officials on this point. They really seem quite in earnest about it. The Royal Institute of Public Health is quite frantic upon the question. Even they don't know what to say about it, and they want the poor bewildered Government, worried to death over War Office delinquencies and Education criticism—which drops this question like a red-hot cinder—to define it for them! It is too bad. You may rely upon it that, whatever follies the present Government may have been guilty of, they are not quite so foolish as to attempt the definition of 'efficient vaccination.' You may rest assured they will leave that problem for the next Liberal Government to settle. (Cheers.)

But the biggest joke of all is, that the Society of Public Vaccinators is dying to get the same question answered! Now the President of that blessed Association is none other than Dr. Greenwood, the Public Vaccinator for Marylebone. And at a Meeting of the Marylebone Guardians on the 16th June last year, attention was called to fact that the Public Vaccinator's account for the quarter ending March 25th, was £2,249, or at the rate of nearly £9,000 per annum. Now this gentleman says he believes in vaccination. (Laughter.) I should be greatly surprised if he didn't—(cheers)—but yet after vaccinating these 7,000 persons, of whom 4,914 were vaccinated at their own homes at 7s. 6d. per head, he evidently like everyone else, wants to know 'what efficient vaccination is.' (Laughter.)

Ay, and we want to know the same thing. 'We'll all go a-hunting to-day.' (Cheers.)

For once we are all willing to join voices with all the great vaccinating bodies in the kingdom, and to swell the cry of 'What is efficient vaccination?' (Cheers.) Let us ask this question in season and out of season. Let us have it not only defined, but let us have it proved, and let us demand that the Government shall not impose another fine, nor inflict upon us the continuation of a compulsory Vaccination Act, until they have not only defined efficient vaccination, but have allowed a certain number of years to elapse in order to prove the correctness of their conclusions. We have had enough guess work, and statement, and impudent assurance, we now want fact. (Cheers.) We might ask them at the same time to define vaccination itself—a feat which has never yet been accomplished; but, anyhow, it is time all these officials were stopped in their filthy and ignorant work until they can give us a guarantee of its efficiency —a guarantee backed by a heavy penalty if it fail in its promised blessing. As it is at present, with the abject acknowledgment of crass ignorance of the most elementary details of their practice—by the very men who are diddling the public purse of thousands upon thousands per annum—we can only stand bewildered with astonishment. Upon the strength of their own confession of ignorance we can but conclude vaccination to be the most gigantic piece of quackery ever exploited among a civilised people in this or any age of the world's history. The manner in which Royalty and people, statesmen and scientists, have been severally hoodwinked by this baseless and palpable superstition, reads like a weird romance from the pages of the 'Arabian Nights,' or a grotesque farce from the scenes of a comic play. Let us not be indifferent to the sweet

and touching innocence and acknowledged ignorance of these deluded though culpable bodies, but let us too raise our cry with a stern and determined voice, and demand that the Government shall impose no further act of compulsion until they answer the question : 'What is Efficient Vaccination?' "—(*V.I., April, 1903, pp. 8–11.*)

"We have but one policy, the policy that the old pioneers of the movement had at the very beginning is the policy that we have still, and that is to demand from Parliament the total repeal of the compulsory clauses of the Vaccination Acts. (Applause. A voice : 'Why not the whole lot?') An earnest friend says he objects to them altogether. If I were to give my own personal opinion I should possibly go further than he does. I would make it a penal offence to vaccinate at all. But we are discussing now what we are going to ask from Parliament, and we have to be diplomatic. My opinion is that if we can get rid of the compulsory clauses the whole thing will go bang. . . . . It has never yet been scientifically proved that vaccination is of the slightest benefit in either preventing or mitigating small-pox. Neither science, nor experience, nor statistics, nor history has ever been able to provide one single solid reason for the belief in the protective powers of vaccination. . . . . I have devoted a very great deal of time in investigating cow-pox in the cow itself. . . . . I have also spent an immense amount of time in the study of small-pox, and I can truly say, as a result of my experience, that cow-pox bears no analogy to small-pox, but that it does, in all its stages, bear a very striking resemblance to syphilis. . . . . I have already given seven substantial reasons why we claim the total repeal of the compulsory clauses of the Vaccination Acts, and I challenge any medical man

to get rid of any one of them. . . . . I constantly ask my medical friends, 'Will you tell me what protects me?' So far as I know I have never been vaccinated. I have no marks whatever on my arms to show for it. And yet in the epidemic in London in 1893, I was in and out amongst the small-pox hospital ships all the time. Then I went through the hospital wards at Middlesbrough in 1897, and was in and out of the small-pox invaded houses in Gloucester in 1895-6. I have also been appointed official visitor to the Infectious Diseases Hospital at Gloucester, and have visited daily every case of small-pox that has occurred in Gloucester since. I want to know what protects me? . . . As for being vaccinated every week or fortnight, I would sooner have small-pox and be done with it. I can assure you of this, I would sooner stand any risk of my children having small-pox than I would submit them to the risk of cow-pox."—(*V.I., 14–15, April 1905.*)

Dr. Scott Tebb, M.A., M.D., D.P.H :—

"In the case of certain infectious diseases it is a generally accepted belief, with evidence in its favour, that one attack affords some protection against taking the complaint a second time, and according to the modern inoculation doctrine a mild or modified attack suffices to secure this immunity, and therefore it is possible that the inoculation of attenuated small-pox matter may afford some measure of security against a future attack of the disease. As to the nature of 'vaccination' none of us can form an opinion, for the ultimate origin of the vaccine lymph has long ago been lost sight of. Some of it undoubtedly has a small-pox ancestry, because stocks of lymph have from time to time been raised from small-pox matter. The large bulk, however, of the lymph used for vaccination is in all probability

derived from cow-pox, a disease affecting the udders of the cow, and with which Dr. Jenner's name has been associated.

In common with many authorities, notably Professor Crookshank, of King's College, I demur to Dr. Jenner's prescription on scientific grounds, holding that cow-pox and small-pox are entirely distinct diseases, and that therefore they cannot, according to our modern theories, protect against each other.

I should now like to say a word or two as to the prevention of small-pox. Small-pox and typhus fever, which both occupied a considerable space in the bills of mortality in the last century, have largely disappeared in recent years. They are both diseases of the lower classes, and breed amongst those living under the least favourable sanitary circumstances. . . . . In this country it is largely spread by tramps, who live under the most unhealthy conditions, and are often deprived of the common necessaries of life. . . . . The high small-pox and typhus death-rates in the last century were doubtless largely due to the filthy and insanitary conditions which prevailed at that time. . . . . Much the same state of things prevails in parts of India, China, and Egypt to-day, and it is these districts where insanitary conditions are rife which demonstrate the utter futility of vaccination to cope with epidemic small-pox. . . . . All these facts, gentlemen, should impress upon us that the only reliable safeguards against small-pox and other infectious diseases is to pull down dwellings unfit for human habitation, to attend to the proper construction of houses, so as to secure adequate external and internal ventilation, and to see to the prompt removal of all filth accumulations from premises." . . . . .
—(*The Penge and Anerley Press, June 11th, 1901. V.I., July 1901, p. 61.*)

"Vaccination involves the introduction of a specific disease. . . . . Vaccination may occasion a definite risk to life."—(*A Century of Vaccination, p. 303.*)

"Dr. Scott Tebb's fourth chapter treats of the incidence of small-pox upon vaccinated and unvaccinated communities. One of the most striking contrasts presented is one drawn between Leicester and Mold. Leicester with a population under ten years of age practically unvaccinated, had a small-pox death-rate of 114 per million; whereas Mold, with all the children vaccinated, had one of 3,614 per million."—(*V.I., p. 110. Sept. 9th, 1901.*)

"Another generation will be amazed to think that for a hundred years the people of these islands should have remained under this thrall of a mischievous fetich."—(*Century of Vaccination. V.I., p. 69, Aug. 8th, 1898.*)

At the Annual Meeting of the National Anti-Vaccination League, London, February 27th, 1906:—

"At the close of Dr. Creighton's address, which was loudly cheered,

Dr. Scott Tebb proposed a resolution requesting the Hon. Secretary to ask the President of the Local Government Board to receive a deputation of influential opponents of compulsory vaccination, with the object of calling his attention to the cruelty and injustice as well as the the futility of the present laws and practice of vaccination, and urging the Government to take the earliest opportunity to bring in a Bill for the entire repeal of the Vaccination Acts, the withdrawal of the Government support and patronage of the practice of vaccination, and the abolition of all regulations in the State Departments and Government Services. Dr. Tebb, summarising the conclusions of Dr. Creighton and others in England, and

of eminent authorities like Dr. Brouardel in France, said vaccination now stood absolutely condemned, and the inoculation of such a disease as cow-pox into the blood of a healthy child was nothing less than a crime. He expressed confidence in Sir William Collins and other friends in Parliament, but thought an endeavour should be made to obtain relief at the earliest possible moment. Why not go to the strong, resolute, honest, and courageous Minister at the head of the Local Government Board, and tell him what they thought and what they wanted?

This resolution was seconded by Mr. Begg (Glasgow), who suggested a similar deputation to the Secretary for Scotland, and gave rise to a most interesting discussion, in which Mr. J. H. Levy, Mr. Ottley (Bath), Mr. Pannett (Wandsworth), Mr. Marshall (Blandford), Rev. J. Tilson, Mr. Paul, Mr. Booth (Leicester), the Rev. T. Warren, Mr. Unkles (Glasgow), Mr. Richards, M.P. for West Wolverhampton, Mr. Feltrup (Derby), and Mr. Hunns took part. The resolution was adopted."—(*V.I., March, 1906, p. 236.*)

Dr. H. Valentine Knaggs, M.R.C.S., L.R.C.P.:—

The Real Nature of Vaccine Lymph.—A careful study of the history of vaccination from its first inception by Edward Jenner to the present day, shows that four different kinds of lymph have been used, of which three have survived, and one only is admitted.

In view of the importance which must be attached to the exact source of calf lymph (the *fons et origo* of the whole case for or against vaccination) it is essential that a clear understanding as to its precise origin should be grasped.

The 'Horse Grease' Calf Lymph.—The so-called genuine cow-pox lymph of Jenner was obtained by inoculating cows with the purulent matter which came

from the heels of horses suffering from 'grease.' This animal disease is generally considered to be a form of tuberculous ulceration, so that it is little wonder that many of those who were directly inoculated with it, or vaccinated from cows or swine contaminated with the same poison, died from septic fevers (evidently tuberculous). Happily this form of lymph was not long in use, but it clearly shows, even after the lapse of a whole century, that very little has been learnt when an eminent scientist boldly declares that bovine tuberculosis is not communicable to man.

The 'Spontaneous Cow-pox' Lymph.—Mr. Ceely, Dr. Creighton, and other authorities, have closely investigated the precise nature of spontaneous cow-pox. It is the virus which the vaccinists still assert to be the protective influence against smallpox, and consistently, therefore, is, or ought to be, the sole ingredient of all calf lymph.

Spontaneous cow-pox is essentially an animal disease with a human origin. Cows left alone never contract it. Moreover, as Jenner was aware, when he propounded the horse grease theory, it can only be produced when a man milks the cow. It does not arise when women alone do the milking, or even when strict sanitary rules are adhered to in the sheds. The disease occurs at rare intervals, and it is reasonable to infer that a man afflicted with secondary syphilis of the palms of the hands is the exciting cause of cow-pox. Persons vaccinated with, or contracting, cow-pox in its virulent types develope symptoms identical in every way with secondary syphilis. The name cow-pox was given to it on account of the great resemblance that its symptoms showed to that of the great pox.

By constant cultivation from calf to calf, or in former days from arm to arm, the virus became attenuated, and when people were so vaccinated they

generally escaped the marked and visible secondary effects of the disease. Many cases, here and there, especially after re-vaccination with the so-called reinforced lymph, do still show skin diseases and other symptoms strongly resembling those of syphilis, as any medical practitioner of ordinary experience can testify.

The 'Cow-pox-Smallpox' Lymph.—An astute surgeon of the name of Woodville, of the London Smallpox Hospital, in 1799, discovered a cow in the Gray's Inn Road suffering from 'spontaneous' cow-pox. He at once started an arm to arm series of vaccinations from this animal. Being very experienced in the art of inoculation, which in those days was also frequently done from arm to arm, he, either accidentally or designedly, mixed variolous matter with the lymph which he used. As shown in the Minority Report of the Royal Commission, many of the patients vaccinated with this lymph developed smallpox pustules, just as they might have done after inoculation. These pustular symptoms only ceased after the lymph had been passed through several removes.

This mixed lymph was used all over the world for 37 years, and it was by this ingenious subterfuge that Dr. Woodville practically saved vaccination from falling altogether into disuse. The reputation of his lymph was built up upon the 'spontaneous' cow-pox theory, but the variolous matter was undoubtedly the actual protecting influence.

The 'Small-pox' Lymph.—Owing to the difficulty of finding cows suffering from spontaneous cow-pox, no doubt because of the spread of sanitation in dairy farms, experimenters resorted to the artifical inoculation of cows with small-pox pus. Many of these experts, especially Mr. Badcock, of Brighton, succeeded in inoculating cows with this small-pox virus, from which, after attenuation, large quantities of

lymph have been, and are no doubt still, supplied for the purposes of vaccination.

In using such lymph the vaccinists have reverted to the old small-pox-spreading inoculations of the last century. They have not, however, the candour to admit it, since they still assert that the cow-pox lymph is the real protective influence. The only apparent difference between the old inoculation and the new is that improved methods of attenuation are resorted to by passage through many animals, combined with cultivation, sterilization, and the admixture with glycerine. In this way no evident symptoms are made manifest, unless the lymph is accidentally cultivated back to its original untamed condition.

It stands to reason that 'cow-pox-small-pox' or 'small-pox' lymphs are capable of exerting some protective influence upon those who are vaccinated with it. This, however, is done at the expense of the community. It is sure to spread the disease, because the poison is constantly kept in the air, from the thousands of vaccinated desquamating arms, and it is possibly for this reason that nearly all modern epidemics, as for example Glasgow and Gloucester, are found to start with the vaccinated.

The Vaccinists assert that the unvaccinated are a danger to the community, and that a father who refuses to have his child operated on is worse than a murderer, but facts prove that the vaccinated constitute the real element of danger."—(*V.I., January, 1902, p. 176.*)

"I look upon vaccination as the empirical use of a secret remedy. Neither the analyst, the bacteriologist, nor the pathologist can as yet give us any information as to the nature or composition of glycerinated calf lymph. There are no means of ascertaining whether calf lymph is made from the poison of cow-pox or from that of small-pox. The his-

tory of cow-pox is so intimately associated with syphilis (*i.e.*, it is syphilis of the cow) that to me its use is particularly objectionable. On the other hand, the use of lymph obtained by deliberately engrafting small-pox upon cows by means of hen's eggs, or monkeys, or any other means, is but another name for the penal offence known as inoculation, which was put down because it spread small-pox. I am at a loss to know why I should be subjected to repeated police court prosecutions in order to have forced upon me a legalised quack remedy, when I am debarred by medical ethics from using other equally mysterious compounds which do not bear the stamp of authority."—(*V.I., June, 1903, p. 56*).

"At the Marylebone police court yesterday, before Mr. Francis, Dr. Henry Valentine Knaggs, of Camden Road, N.W., was summoned under section 29 of the Vaccination Act, for neglecting to have Norah, and under the second part of section 31 of the Act, for refusing to have Dulcie, two of his children, aged respectively eight months and two years, vaccinated. The case had been adjourned from last week to allow Dr. Knaggs to be represented by counsel.—(" *Morning Leader*," *May 13th, 1903; see also V.I., June, 1903, p. 56*).

"It is most essential, in my opinion, that efforts should be made to clear up the mystery which surrounds the nature and origin of vaccine lymph. . . . . Dr. Charles Creighton, in 1887, showed that the real affinity of cow-pox was not to small-pox but to great-pox. . . . . Professor Crookshank . . . . his ultimate conclusion was substantially the same . . . We are, also, I think, entitled to demand that at least until this mystery is cleared up, compulsion should cease. There can be no justification whatever for the universal compulsory inoculation of syphilis, even though the disease is modified and its sym-

toms masked by passing it through calves."—(*V.I., April, 1904, p. 12, 13*).

"Since I was subjected to the indignity of police court prosecutions, I am glad to say that I have taken a most active part in turning the searchlight of publicity upon laws which compel a parent to instil a disease into the pure blood of an infant, a disease, too, which will largely account for the decay of the teeth, the defective eyesight, the widespread prevalence of nose troubles, and the other signs of physical deterioration which are so evident at the present time."—("*Morning Leader*," *August 9th, 1905*).

Dr. Josiah Oldfield, M.A., M.R.C.S., D.C.L.:—

"I have never yet been able to understand the necessity of compulsory vaccination. If vaccination protects the person vaccinated, it cannot matter to such a person whether or not his neighbour is vaccinated. If I believe that the risk of small-pox is greater than the risk of vaccination, and that vaccination will prevent small-pox in myself, I have a perfect right to be vaccinated, but I wholly repudiate the idea that because of my belief, I shall force a rite upon you in which you do not believe—and wherein your belief or non-belief, your observance or non-observance of the rite can have no effect on me if my belief is well founded in fact. If vaccination is efficacious against small-pox, it *need not* be compulsory; if not efficacious, it *should not* be. To teach men to save their bodies to-day by imprisoning and fining them is on a par with the spirit of the inquisitional age, which tried to teach men to save their souls by burning them and racking them. All teaching of dogma by brute force is wrong, because it is contrary to the evolution of truth. There is always the dreadful possibility—the dogma of the inquisitor about the soul, and the dogma of the vaccinator about the

body—*may be wrong?* Volumes written to support either position do not necessarily prove their truth." —(*V.I., 161, 11, 02*).

"I very gladly send you my best wishes that your efforts for the abolition of compulsory vaccination will not be relaxed until they are crowned with success. I have during this year had to suffer the personal unpleasantness of having my name associated with thieves and disorderly vagrants in the reports of the Privy Sessions, because I refused to allow my twin girls to be vaccinated. The way to prevent this trouble is by the loophole of applying for exemption on the ground of conscientious objection, and had the magistrates of the land administered the law in the spirit in which it was passed, I would have taken advantage of this method of escaping penalties. But my poor lay brothers have been so heckled by magistrates, and bullied for their conscience sake, that I felt bound to refuse to submit to a possible similar indignity.

I fail always to understand why my neighbour's child can possibly be afraid of my unvaccinated child. If vaccination protects from small-pox, my neighbour's child is safe, even though my child has the disease. If vaccination does not protect, why vaccinate? Personally, I am of opinion the vaccination has a limited power of prophylaxis against small-pox. Personally, however, I am of opinion that the purity of the sacred blood stream of the human race is of such transcendant importance, that it is as mystically dangerous to mix it with animal lymph as it would be desecrating to marry the daughter of a royal line of kings to a negro husband. All religions have stringently forbidden the intermingling of the animal and human life forces, and I believe that modern science is arrogantly oblivious of the mystic experience of spiritual teachings, when it advocates the inocu-

lation of the human infant with animal-obtained lymph."—(*V.I., May 1st, 1903, p. 33*).

Dr. Robt. Stopford :—

"Vaccination.—Dr. Robert Stopford, Southport, was on February 14th, summoned before the local Bench for neglecting to have his three children vaccinated. Defendant pleaded conscientious scruples against a degrading operation. The Vaccination Commission, he said, agreed that it was possible to guard against small-pox by sanitation. In a foreign country, where vaccination was unknown, he had himself stamped out a small-pox epidemic, so that he had some reasons for his contentions. If vaccination were effected as in the German States, he would be perfectly willing to comply with the law. There it was carried out on the principles of the purest science, with no chance of disease resulting; but here there was no guarantee that the lymph was calf lymph, and he never vaccinated a child without the greatest revulsion. He was ordered to vaccinate two of his children within fourteen days, and to pay the costs. The third case was withdrawn because of the child's illness."—(*The "Times," Feb. 18th. V.I., April, 1898, p. 16.*)

Dr. H. C. Gillies, M.D., M.S. :—

"Applied for and was granted a certificate exempting him from having his child vaccinated on the ground of a conscientious objection."—(*V.I., Sept., 1904, p. 121.*)

Professor Alfred Russell Wallace, LL.D., F.R.S

"Ample proof now exists of the fallacy of this belief, since vaccination gives no protection whatever."—(*"Vaccination a Delusion," p. 9.—Swan, Sonnenschein & Co.*)

"Vaccination is not only a worthless, but an injurious operation, a gigantic medical imposture."—

(" *Summary of Proofs*," *p. 21. Nat. Anti-Vaccination League.*)

"Vaccination is the probable cause of about 10,000 deaths annually, by five inoculable diseases of the most terrible and disgusting character."—(*See "Vaccination a Curse," p. 130.*)

"It will be observed that, as in England, there was a great and sudden decrease of small-pox mortality after 1801, the date of the first vaccination in Sweden, and by 1812 the whole reduction of mortality was completed. But from that date, for more than 60 years, there was an almost continuous increase in the frequency and severity of the epidemics . . . . the official returns now given show that down to 1812, when the whole reduction of small-pox mortality had been effected, only 8 per cent. of the population had been vaccinated. . . . . In 1874 there was a small-pox mortality of 7,916 per million, reaching 10,290 per million during the whole epidemic which lasted two years. This was worse than the worst epidemic in London during the 18th century . . . . there is no sign of a relation between vaccination and the decrease of small-pox. . . . . This case of Sweden alone affords complete proof of the uselessness of vaccination."—(" *Vaccination a Delusion*," *pp. 45—47.—Swan, Sonnenschein & Co.*)

" My next diagram (No. VI.) shows the course of small-pox in Prussia since 1816 . . . . Dr. Seaton in 1871, said to the committee on vaccination (Q 5,608) 'I know Prussia is well protected,' and the general medical opinion was expressed thus in an article in the *Pall Mall Gazette*, May 24th, 1871, 'Prussia is the country where re-vaccination is most generally practised, the law making the precaution obligatory on every person, and the authorities conscientiously watching over its performance. As a natural result, cases of small-pox are rare.' . . . . . .

Immediately after the words above quoted were written the great epidemic of 1871–72, caused a mortality in re-vaccinated Prussia, more than double that of England. . . . . .
I give one more diagram (No. VII.) of small-pox in Bavaria, from a table laid before the Royal Commission by Dr. Hopkirk, for the purpose of showing the results of long-continued compulsory vaccination. He stated to the Commission, that vaccination was made compulsory in 1807, and that in 1871 there were 30,742 cases of small-pox, of which 95·7 per cent. were vaccinated (2nd report, Q. 1,489) . . . . .
In Bavaria, as in all the other countries we have examined, the behaviour of small-pox shows no relation to vaccination . . . . . the theory that the disease is 'mitigated' by vaccination, even where not prevented, is shown to be utterly baseless."—"(*Vaccination a Delusion," pp. 49-50.*)

"It is thus absolutely demonstrated that it is the exceptionally *unvaccinated* that possess the exceptional advantages, while the 'exceptionally *re-vaccinated*' Army and Navy show quite exceptional *disadvantages*, in a small-pox mortality during the same twenty years, more than *four* times as great as the exceptionally *unvaccinated* town of Leicester!

For the reasons now stated, we call upon voters of all parties to refuse support to every candidate who upholds the legal or other enforcement of vaccination, which, as we have shown, both spreads disease and increases mortality. No government has the right to order healthy infants to be blood-poisoned under the pretence of protection against a danger that may never arise. The abolition of all laws enforcing or encouraging vaccination is therefore of more immediate and vital importance than any party dogma or any political programme "—(*Army & Navy, p. 304, Nat. Anti-Vaccination League.*)

Dr. E. A. Heath, London.

"I am a strong opponent of vaccination, which I consider to be a most absurd and dangerous practice. Even if it prevented small-pox I should be against it, because I believe that the mortality caused by vaccination far out-numbers the deaths from small-pox. If men strived to obtain health, and used proper sanitary precautions, we should have no small-pox or anything else, their health would protect them. Therefore, if health protects us from disease of all kinds, is it not illogical to make our bodies more diseased to protect us from disease? Jenner himself stated that by vaccination the human body was *permanently altered.* If permanently altered by introducing an animal disease, and *nothing* can eradicate this diseased state, because it is not acquired by infection, which may be destroyed, and is destroyed, by healthy glands, so that infection passes us by, but if these disease taints are put into the blood, it goes behind nature and cannot be destroyed, it becomes a constitutional state, on which other diseases may take root, thus increasing mortality."—(*V.I., p. 183, December, 1902.*)

Dr. Gordon Stables, R.N., M.D., Etc. :—

"Vaccination.—My readers know that I have held views in favour of this. I must confess that I begin to waver. My mind is like a ship's mainsail before the vessel goes round on another tack, all a-shiver. Gloucester notwithstanding! but I do not change my mind easily. I am like a cow. I like to smell a thing before swallowing it. But I think, nevertheless, that it is time the whole subject of vaccination was studied from every side, and that is just what it has not been as yet."—("*Bolton Journal,*" *see V.I., December, 1897, p. 124.*)

"Talking of consumptives. It is being recognised now that the complaint is not a disease of the lungs

(in reality), but that the lung trouble is simply a symptom or expression of a disease that invades the whole body. Besides, we can hardly name a trustworthy medicine which has a really specific effect on the lungs. Exercise and gymnastics to develope the chest would therefore seem to do more harm than good, and the best authorities recommend rest whenever there is a high afternoon temperature, but this rest should be in the fresh air. Even the giving of too much food is now being condemned by many authorities. We would really seem to be as far away as ever from finding out a cure for such maladies as consumption and cancer."—(*"Staffordshire Sentinel," January 27th, 1906*).

Dr. Louise Appel, M.B., B.S., B.Sc. (Lond.) :—

"It is apparently also unknown to the League (I.V.L.) that one Anti-Vaccinist with no vaccination scars—for he has never been vaccinated—has the unique privilege of visiting the small-pox hospitals of the Metropolitan Asylums Board, as a member of that Board. This gentleman . . . has visited these Small-pox Hospitals, once a fortnight, for the past twelve years, and he has not yet contracted small-pox."—(*A non-vaccinator's comments, &c.*).

Dr. Vandrey (Plymouth) :—

"The object which you are met to promote—the abolition of compulsory vaccination—has my entire sympathy. If the advocates of compulsion cannot see that by such advocacy they have given up the whole case for vaccination as a preventive of small-pox, they would do well to reconsider the question in the light of reason and common sense."—(*V.I., April, 1905, p. 8.*)

Dr. J. G. Shipman, M.P. :—

"I am opposed to parental coercion in the matter of vaccination, and wish the last shred of it were cast

to the winds."—(*V.I., p. 160, Nov. 1902.*)

"He hoped to be present to hear the speeches against the tyranny of the Vaccination Laws."—(*V.I., April, 1905, p. 12.*)

Dr. Augustus Johnson (Ambleside):—

"Although the fight has been long and arduous and very uphill, and although, unfortunately, it may still be long protracted, yet I think that no one who has an adequate knowledge of the merits of the case, and believes in the government of the world by a Power that makes for righteousness, can have any reasonable doubt as to the ultimate issue of the conflict."—(*V.I, April, 1905, p. 8.*)

Dr. Rennet:—

"Said that 'to inoculate children with lymph taken from corpses was an indictable offence. He had never heard of its being done.' In that respect he is no worse that was 'the *General Practitioner*' which had to apologise to the '*Morning Leader*' of London, for declaring this corpse lymph story to be 'a base invention.'"—(*V.I., 95, August, 1905*).

Dr. (now Sir) W. J. Collins & Mr. Picton (members of the Royal Commission on Vaccination:—

72. "The vaccinated, nowadays, generally constitute the majority of the patients in small-pox hospitals, and in certain limited outbreaks only vaccinated persons have been attacked.

Thus, Mr. Marson records 3,094 cases of post-vaccinal small-pox, treated by him at the Highgate Hospital between 1836 and 1851, and a further series of 10,661 such cases between the years 1852 and 1867.

Dr. Gayton during the years 1870 to 1883 treated 8,234 cases of small-pox in vaccinated persons in the hospitals of the Metropolitan Asylums Board. At Sheffield in 1887-8, 5,035 vaccinated persons were

attacked with small-pox.

It is, however, superfluous to cite further evidence at this stage to prove, what is no longer denied by anybody, that small-pox attacks the vaccinated.

No witness who has appeared before us has maintained the original contention of Jenner and the earlier vaccinators, and the protection now claimed by those who assert such protection is relative, not absolute; temporary and not permanent.

73. It was at one time alleged that even if vaccination did not invariably prevent attack by small-pox, yet such attack was modified and never severe or fatal. There can, however, be no doubt that fatal small-pox and cases of the disease in all its various types of severity occur in persons who have been successfully vaccinated.

74. "Dr. Gayton's tables include fatal cases, not only in those stated to be vaccinated but without visible marks, nor only in those whose marks were considered to be imperfect, but also amongst those who exhibited at the time of their attack one, two, three, and four good marks of vaccination. We are not now concerned with the question of relative mortality in the various classes, to which we shall return, but these and numerous other examples suffice to prove, what we believe is no longer disputed by anyone, that severe and fatal small-pox occurs in those who have been successfully vaccinated."—(*Statement by Dr. Collins and Mr Picton of the grounds of their dissent from the Commissioners' Report*).

Sir W. J. Collins, M.D., M.P., B.Sc., F.R.C.S., Etc.

"No medical man with a reputation to lose would be prepared to maintain the position as regarded the preventive power of vaccination, or its innocence as to injurious results which were originally claimed by Dr. Jenner: nor could anyone take up the position

of Lord Lyttleton, when in 1853, he maintained that the medical profession were unanimous as to the certainty of vaccination as a preventive, and that the operation was perfectly safe. No witness examined before the Royal Commission maintained either of those propositions. He was heartily in favour of the entire abolition of compulsion, and it would redound to the credit of the medical profession to be free from the association with the policeman and the bailiff. He believed that this one proscription which had been singled out by the State had rather tended to hinder the progress of medical science."—(*House of Commons, April 25th, 1906.—see "Daily News" 26th April, 1906*)

INDEX.

A

Abandonment of Jenner .. 45
Abbreviations iv
Act, publicly burnt 53
Acute pemphigus 62
Ackerley, Dr. 63
Advantages on paper only .. 39
Affords none 36
Aldershot 62
Anti-Vaccination League .. iv
Auge, Dr. 19
Animal disease.. 90
Anti-toxin 60
Appel, Dr. Louise 91
Army 61, 89
Arm-to-arm 81
Assassination 20
Assimilation 20
Ayerst, Dr. 18

B

Badcock, Dr. 6, 82
Barnes' child 39
Back at inoculation 45
Baronetcies 61
Bavaria 89
Beddoes, Dr. 1
Birch, Dr. John 1
Blackness of skin 40
Blossom 15
Blood assassination 20
,, poisoning .. 15, 18, 89
,, stream sacred 86
Bonner, J. H. 43
Bond, Dr. F. T. 56, 70
,, Dr. Knox 65
Brett, Dr. T. 27
British Medical Journal .. iv
Brown, Dr. T. 6
Brooke, Dr. 55
Brouardel, Dr. 80
Burning Vaccination Act .. 53

C

Calf 16
Cancers 14, 16, 19, 90, 91
Cameron, Dr. J. 18
Carpenter, Dr. R. H. S. .. 26
Ceely, Dr. 25
Chicken-pox 13, 31
Chauveaux 25
Charnel house 65
Characteristics of cowpox 32, 38, 41
Clapp, Dr. 62
College of physicians.. .. 10
Collins, Dr. W. J. .. .. iv, 9
Collins, Sir W. J. 24, 70, 80, 92, 93
Communicable disease .. 29
Consumption 11, 12, 13, 19, 90, 92
Confidence trick 48
Copland, Dr. J. 8
Coroner's Court 59
Corroding ulcers 41
Cordwent, Dr. G. 21
Coupland, Dr. 51
Cow-pox 1, 29, 32, 37, 41, 64, 81, 84
,, worse than small-pox 2
Creighton, Dr. C. 35, 36, 39, 43, 53, 79
Crookshank, Prof. iv, 29, 34, 78, 84

D

"Daily News" 94
Death from vaccination .. 18
Decline and fall of vaccination 43
Deliberate falsehood.. .. 56
"Derby Daily Telegraph" .. 62
Diphtheritic virus 60
Disinfection 8, 10
Dimsdale 11, 35
Doctors; conscientious objectors 84, 85, 86, 87
Dogma 85, 89
Donovan, J. 59, 61, 65
Dry lymph 9
Drysdale, Dr. C. 19
Dunning 31

E

Eadon, Dr. S. 19
Efficient vaccination 67, 72, 76
Egypt 78
Emoluments 61
Enormous swellings 40
Erysipelas 24, 26
Experiment failed 1, 6

F

Failure of vaccination .. 37
Fatality 93
Fever 17
Fielden, Captain 65
Fivefold coil 21
Foul ulcers 1
Framed on falsehood.. .. 56

G

Gangrene 41
Gayton, Dr. 49, 69, 92, 94
"General Practitioner" .. 92
Germany 11, 48, 49, 88

INDEX.—*(Continued.)*

Gigantic imposture 87
Gillies, Dr. H. C. 87
Glasgow 49, 83
Gloucester .. 49, 52, 54, 83, 90
Glycerine nutritive 64
Glycerinated cow-pox 42, 59, 61, 64
Goldson, Dr. 4
Goodman, Dr. 26
Greenwood, Dr. 74
Gregory, Dr. 7
Grosvenor, Lord Robert .. 51
Guy, Dr. W. A... 26

H

Hadwen, Dr. Walter D. .. 49
Halifax 39
Haughton, Dr. E. 46
Haygarth 33, 34, 35
Have you been vaccinated .. iv, 2
Heath, Dr. E. A. 90
History and Path. Vaccination iv
Hitchman, Dr. W. 14
Hoggan, Dr. 27
Hopwood 43
Hospitals 55, 65, 91, 92
Howarth, Dr. 62
Horse-pox 32, 35, 64, 80
House of Commons 1, 11, 14, 43,54,94

I

Idol of market place 28
Immunity 22, 23, 30, 33
Improper lymph 31
India 64, 78
Infant mortality 52
Injuries .. 3, 4, 16, 17, 26, 39, 40
Inoculation 10, 11, 12, 28, 29, 31,45,49
Increased mortality 88, 89
Insanitation 55, 56
Isolation 7, 34, 35
I. V. League 73, 91

J

Jenner, Dr. Edward 1, 2, 11, 30, 93
,, thrown over.. .. 45
,, unqualified 49
Johnson, Dr. 27
,, Dr. A. 92

K

Keighley 53
Kharkoff University 46
Klein, Dr. 25
Knaggs, Dr. H. V. 80, 84
Knighthood 61

L

Laurie, Dr. W. F. 19
Leicester 53, 79, 89
Liverpool 14, 16
Local Gov. Board 44, 45, 55, 58, 79
Lymph 9, 14, 32, 47, 59, 80
Lyttleton, Lord 94
Luce, Dr. 63

M

Maclean Dr. C. 6
Makuna, Dr. .. . 24, 26, 27
Madras 64
Marks 68, 69
Marson's tables 69, 92
Mead, Dr. 10
Medical Profession 42, 48, 53, 59, 94
Metrop. Asylums Board .. 91, 92
Meyer, Dr. E. 16
Mitigation theory baseless .. 89
Mischievous fetish 79
Monro, Dr. A. 5
Montagu, Lord Robert .. 9
Moseley, Dr. 2
Mold 79
"Morning Post" 47
"Morning Leader" .. 84, 85, 92

N

National A. V. League .. iv
National Vaccine Estab. .. 32
Navy 89
Newman, Prof. 47
No medical man 93
Normanton Barracks .. 61
No protection 27
Notoriously dangerous .. 49
Notification 7, 34

O

Oil of Captain Fielden .. 65
Oldfield, Dr. Josiah 85
Original contentions 93
Origin of cow-pox 1, 29
Our policy 76
Overwhelming evidence .. 31

P

Pathology 38, 44, 46
Parliament 43, 54, 76
Pasteur Institute 60
Pearson, Dr. 30
Pemphigus 62
Penal clause 44
"Penge and Anerley Press" 78

Permanently altered 90
Phagedœna 40
Phlegmon 26, 27, 40
Phipps, James 11
Physicians, college of .. 10
Pickering 56, 65
Picton 38, 92
Protection 36
Protoplasm 16
Professional glory 61
Political dogma 89
Prussia 88
Pure lymph 14

Q

Questions R.C.V. .. 16, 22, 36
,, Makuna 24

R

Real element of danger .. 83
Reputation 93
Revival of inoculation .. 45
Results 53
Rennet, Dr. 92
Ricord, Prof. 19
Richardson, Sir B. W. .. 28
Roth, Dr. 26
Rottenness 40
Rowley, Dr. 4
Royal Society 10
R.C.V. iv, 17, 23, 28, 36, 50, 82, 92, 94
Ruata, Prof. C. 47
Russia 11

S

Sabin, Daisy 50, 71
Sankey, Dr. W. 27
Sanitation 25, 28
Sacred blood stream 86
Scrofula 12, 19
Septicæmic 62
Secret remedy 83
Shipman, Dr. 91
Sheffield 37, 49
Simon, Sir John 57
Simpson, Sir J. Y., Bart. .. 7
Skinner, Dr. T. 16
Sloughing 41
Small-pox 1
S. after vac. 2, 3, 4, 5, 6, 7, 8, 12, 22, 27, 31
Smith, Dr. 5
Squirrell, Dr. 3
"Standard" 43
Stevenson, Dr. John 3
Stables, Dr. Gordon 90
Stamping out 8, 33, 35
Stowell, Dr. 18
Stopford, Dr. 87
Successful vaccination .. 67, 72
Sutton 11
Superstition 65
Sweden 88
Sweetest blossom 15
Syphilis communicated 6, 13, 15, 19, 35, 53

T

Tebb, Dr. Scott 77
Thwarting nature 9
Thirty thousand pounds .. 53, 57
,, lungs .. 53
Tumours 14
Turnbull, Dr. D. 14
"Times" 87

U

Ulcers 2, 12, 41
Unanimity 42, 60
Unscientific 52
Uselessness of vaccination .. 52
Use for the penal clause .. 44
Utterly indefensible .. 27

V

Vaccination Act burnt .. 53
,, Boards 8
,, gone wrong .. 56
,, delusion 87
,, decline of .. 43
,, Inquirer .. iv
,, Inquiry 24, 26
,, no protection .. 36
,, useless 52
Vaccinated attacked first .. 54
Vaccine virus 14, 33, 42, 48
Vaccinal injuries 3, 4, 16, 17, 26, 39 40
Variolation 30
Variolous test 30, 31
Venom 20
Vermin, crawling 55

W

Wakley, T. 11
Wallace, Prof. 87
Ward, Dr. W. J. C. 27
Water 64, 65
Watson, Sir T. 13
Williams, Dr. C. J. B. .. 12
Wilkinson, Dr. Garth .. 19
Without water 55
,, antiseptics .. 55
Woodville's cases 30, 82
Worn-out horses 60

Y

York Castle 53
Young, Schultess 62, 63

"*Vaccination has become a crime.*"—DR. F. L. OSWALD, M.D.

"*A man would have to have a heart of stone if he would not melt at the sight of the misery it produces.*"—DR. M. FRIEDRICH, M.D.

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"*En mand skulde sikkerlig have et Stenhjerte for at ikke bevæges ved Sigte af Elendigheden det foraarsager.*"—*siger* DR. M. FRIEDRICH, M.D.

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"*Y un hombre necesita tenir corasón de piedra para no sentir compasión á la vista de la miseria que produce.*"—Dr. M. Friedrich, M.D.

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Direccion.....

Pueblo.....

Provincia .....

Pais.....

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"*Un nomo che non sente pietà alla vista del male che la vaccinazione produce, deve avere un cuore di pietra.*"—Dr. M. Friedrich, M.D.

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CONTENTS.

PAGE

ACKNOWLEDGMENTS, ABBREVIATIONS, CORRECTIONS, CONTENTS vii-xvii

LISTS OF ILLUSTRATIONS AND PLATES .. .. xix-xxiii

Chapter I.—"RAISON D'ETRE." Object—Parliament and lead-poisoning—Preventive measures—Arbitration proceedings, November, 1901—Manufacturers' opinions—Outsiders'—Commercial aspect—Oven fumes—Looking backward—Public opinion—Adjourned arbitration—The award—Conclusions .. 1-22

Chapter II.—HISTORICAL REVIEW OF DECORATIVE-TILE WORK. Service of the potter's art in history—Babylonian and Assyrian—Egyptian—Grecian—Roman—Romano-British—Persian—Syrian—Rhodian Saracenic—Turkish—Hispano-Moresque—Indian—Chinese—English mediæval—Italian mediæval and renaissance—German renaissance—French mediæval and renaissance—Delft 23-179

Chapter III.—RISE OF THE MODERN INDUSTRY IN DECORATIVE TILES. Revival of the use of tiles—English Delft tiles—Herbert Minton—G. Maw—Prosser and Blashfield—Michael Daintry Hollins—L. Arnoux—Coloured glazes—Dust encaustics—British manufactures—Continental—Persian—Indian—U.S.A.—Australia—New Zealand—China—Japan 180-238

Chapter IV.—SOURCES AND PREPARATION OF THE CLAYS, MATERIALS AND COLOURANTS. Choice of clays—Subsidiary ingredients—Chemical analysis—Saggar marls—Buff marls—Red marls—Ball Clay—Siliceous clay—Kaolin—China-stone—Felspar—Quartz—Flint—Whitening—Barytes—Alumina—Boracic acid—Borax—Soda—Nitre—Pearl-ash—Zinc oxide—Tin oxide—Compounds of iron—Manganese—Cobalt—Nickel—Copper—Chromium, etc. 239-399

Chapter V.—CERAMIC PYROMETRY. Wedgwood's pyrometer—Kirkup's contraction tables—Brongniart's pyrometer—Seger cones—Professor Orton's batch-weights for cone compositions—Holdcroft & Co.'s thermoscope—Watkin's heat recorders—A.B.C. pyro-indicators—Professor Sir Roberts-Austen's electrical pyrometer—Le Chatelier's pyrometer—The "Queen" electrical pyrometer—Cambridge pyrometer—Automatic wireless electrical pyrometry—Immersion thermometer 400-435

Chapter VI.—BLUE AND RED FLOOR-QUARRIES. Use of floor-quarries—Clays—Analyses—Preparation of clays—Moulding—Drying—Kilns—Setting in—Burning red quarries—Burning blue quarries—Chemistry of blueing 436-443

Chapter VII.—PLAIN AND ENCAUSTIC FLOOR-TILES AND TESSERÆ. Definitions—Desirable qualities—Durability—Colour—Exactness of size—Foothold—Discoloration—Frost resistance—Strength—Preparation of bodies—Dusts—Tile-pressing—Encaustics—Biscuit oven—Burning—Sorting—Recipes for bodies.. 444-517

CONTENTS.—(*Continued.*)

Chapter VIII.—Mosaic (Museaic) Pavements and Mural Decoration. Definitions—Chaldæan cones Egyptian inlaid work—Grecian Roman—Glass mosaics—Byzantine—Italian—Venetian—British—St Paul's Cathedral—Marble mosaics—Grecian - Roman — Italian — Saracen — Indian — Modern European—Ceramic mosaic—Roman — Blashfield — Prosser—Minton—Contemporary 518–545

Chapter IX.—Composition of Glazing-Tile Bodies. Interchange—Crazing—Defects of dust-made tiles—Insanitation—Qualities of a good glazing-tile body—Preparation of bodies—Shrinkage—Tile pressing—Embossed tiles—Placing—Burning—Recipes 546–572

Chapter X.—Underglaze Decorative Processes. Slip-painting — Barbotine — Recipes for coloured slips — *Pate-sur-pate*—Parian—*Sgraffito*—Biscuit-painting — Biscuit printing — Roller printing machines—Underglaze colours—Aerograph 573–610

Chapter XI.—Leadless Glazes and Art-Enamels. Leadless glazes now in use—Precautions recommended—Opinions of experts—Defects in lead glazes—Public discussion—Essential qualities of glazes—The *Lancet* analytical commission—Government inquiry—Contemporary glazes—Individual influence of ingredients—Preparation of frits and glazes—Composition of glazes—Costs—Recipes 611–714

Chapter XII.—Application of the Glazes. Tile-dipping—Clouding—"Majolica" painting—Glaze-enamelling—Spraying—Drying — Placing — Setting in kiln—Glaze kilns — Firing—Sorting—Shading—Vitreous fresco—Salt-glazing 715–735

Chapter XIII.—On-Glaze Decorative Processes. Emery-wheel etching—Sandblast—Enamel-colour painting—Glost-printing — Litho-transfers—Aerographing—Lustres—Copper-ruby glaze—English lustres 736–748

Chapter XIV.—Constructional Faience and Enamelled Terra Cotta. Evolution—Early pioneers—Doulton's exhibits at Philadelphia—Wilcox's glazed fire-clay wares—Lustres—Faience for exteriors—Stonewares—Doulton wares—Recipes—Processes—Firing 749–779

Chapter XV.—Colour, Design, Drawing and Estimating. Need of colour—Light and colour—Tints and Shades—Colour Schemes—Colour in architecture—Principles—Symbolism—Designing for tilework and faience—Drawing—Estimating .. 780–818

Appendix (A) Amended Special Rules 819–827

(B) Setting Tile 828–836

(C) Notes on the Tile Decoration found on Buildings in Punjaub and Bengal 837–840

Index 841–852

OPINIONS OF THE PRESS.

British Clayworker.—"One can hardly rise from reading Mr. Furnival's new book without a keen sense of the intense and persistent labour involved in its compilation. In many respects the book is almost encyclopædic in character, particularly in relation to the question, in all its many aspects, of leadless glazes. . . . . Mr. Furnival is to be heartily congratulated. . . . . The work should find an honoured place in the library of all clayworkers interested in the progressive advancement of British Ceramics."

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Researches

ON

Leadless Glazes

— BY —

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1898.

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THE LANCET ANALYTICAL COMMISSION ON SOME LEADLESS GLAZES.—(*Lancet*, January 7th, 1899)—"By the courtesy of Mr. Furnival, we have obtained some specimens of the glaze and of the ware finished by its means. They consisted of various types, such as saucers, cheese plates, dessert plates plaques, &c., all of which we have examined and tested and submitted to experiment. No. 1 was a leadless glaze, marked No. 2855, and described as having been used in the dipping of all the samples of ware marked 2855. Examined for lead this glaze gave absolutely negative results. Borax was an important constituent. When tried on 'biscuit' in the oxyhydrogen flame, a clear uniform glaze resulted. The second specimen was a saucer, one half of which was glazed with lead glaze, and the other half with leadless glaze. This appeared to us to be a perfectly successful demonstration of the practicability of using Leadless Glaze. In appearance the Leadless Glaze was in every way as good as the lead glaze. Careful chemical test showed the presence of lead in one case, and the absence of lead in the other.

The specimen taken as a third example was a dessert plate with coloured pattern and gold border. The glaze was excellent and was free from lead.

These examples will suffice, but we may add that we have examined and tested in all fourteen pieces with satisfactory results. There was never any indication of lead in glazes marked "leadless."

We consider that these results are of the utmost importance, for they indicate the probability of satisfactorily substituting absolutely leadless glaze for the old veneer, without detriment to the beauty and finished appearance of the product.

Staffordshire Sentinel.—"It is clearly not his fault if the recipes he publishes do not convey the last word which can be said on a contentious matter. Mr. Furnival approaches the subject of Leadless Glaze in the serious vein, warranted by the importance of the great issues involved. He treats with consideration the opinions of some of the most experienced among contemporary potters, who are known to entertain strong views as to the inutility of glazes in which there is no lead whatever. Early in his arguments, the author appeals to history to show the durability of Leadless Glazes. He points out that the glazed tiles of the Egyptians, the ceramics of the Chinese, the best products of Persia, even the porcelain of Sevres itself, in its hardest forms were one and all free from lead, whilst, strangely enough, Assyrian ware in which lead in

small quantities was used, was the least permanent. He therefore arrives at the conclusion that saleable ware of the classes usually manufactured in the North Staffordshire. and other similar potteries, can be produced without the employment of lead at all. If Mr. Furnival's conclusions can be verified, his work will prove to be of the utmost value."

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Mr. FREDERICK HEATH, manager of the Victoria Pottery, Fenton, Staffordshire, writes on December 1st, 1898 :—"I shall be glad to show you, not only samples, but hundreds of dozens of ware dipped in a leadless glaze mixed from three different formulas out of your book, and I have proved them to be suitable for every colour I use, and quite 30 to 40 per cent. cheaper." Again on February 23rd, 1899, Mr. Heath writes :—"I am finishing all my lead glaze up this week, and next week I commence entirely using the Leadless Glaze."

On March 29th, 1906, Mr. Heath wrote: "In reply to yours of to-day, I beg to say you are quite correct in assuming that I am still using *only* Leadless Glaze, and have been doing since 1899. I may add, that I am perfectly satisfied with the results."

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